

STUDENT SERVICES
LIQUOR APPROVAL FORM

TO: Responsible Building Officer, _____ Building

FROM: _____ Organizing Committee

We wish to hold a _____ in the _____ during the
Type of Function Room

hours _____ to _____ on _____ at
Date

which alcoholic beverages will be served. We will ensure that all University regulations concerning use of the facilities and concerning sale and consumption of alcoholic beverages are followed. We further agree to reimburse Memorial University of Newfoundland for any damages caused to the facility

Organizing Committee

Phone No.

It is the University's policy that unless both the Building Officer and the Co-ordinator, Student Services agree that security is **not** required, then security must be at all functions.

As Building Officer, I REQUIRE STUDENT SECURITY _____ / RECOMMEND STUDENT SECURITY NOT BE REQUIRED _____ at this function.

Building Officer

Approval is hereby granted for the consumption (and sale) of alcoholic beverages at the above function for the:

period of _____ to _____ on _____

No extension is to be granted to those hours except by this department.

STUDENT SECURITY IS REQUIRED _____ / STUDENT SECURITY IS NOT REQUIRED _____

Student Services