MEMORIAL UNIVERSITY OF NEWFOUNDLAND Ancillary Operations Student Alcohol Event Request

Section 1: Contact/Event Details (PLEASE PRINT)				
Department/Organization:				
Name of Organizer:				
Email:		Phone:		
Location of Event (Bldg/Rm #):		Do you have the	Do you have the room booked? □Yes □No	
Date of Event:		Begin Time: End Time:		
Method of Payment: Cash Only □		Estimated Number Attending:		
Selling Price (min. \$2.65): Local Beer: \$ Imported Beer: \$ Liquor: \$				
Wine: \$ Cooler: \$				
Please Note: Alcohol can only be picked up on the Friday of the event & a government issued photo ID is required. Please attach an itemized list of all remaining alcohol from previous events. Please provide the name(s) of trained server(s) for bar & door, and the expiry date of the holder's Server				
Intervention Training (SIT) card.				
Student Name	Student Numb	er	SIT Expiry	
Please provide a detailed description of this event.				
Section 2: Beverage Order Order Beer by the Dozen; Maximum 3 Drinks/Person; Provide Non-Alcoholic Beverages (NABS) Processing fee of 20% to a maximum of \$30 will be applied.				
Quantity Brand and N	ILC Sku	Quantity	Brand and NLC Sku	
Section 3: Signature of Organizer				
I have read the alcohol policies and procedures (www.mun.ca/policy) and agree to all terms and conditions regarding the possession, selling, and consumption of alcoholic beverages. I further agree to ensure that the rules and regulations are not circumvented by anyone in attendance at this event. Signature of Organizer:				
Section 4: Name and Signature of Authorized Building Officer				
Name of Building Officer (P	lease Print)	Signature (Building	Officer agrees to permit organizer to use facility)	
Liquor Permit Granted By (Signature - Director, Ancillary Operations or Designate)				
Campus Enforcement and Patrol		CEP Required] Yes □ No	
Date Notified:			-	