



**Brown University Student Activities Office  
SOCIAL FUNCTION FORM**

**To be completed and submitted with Event Registration Form to the SAO. Please review the Social Function Planning and Management Procedures ([brown.edu/Administration/Event\\_Planning/review/social\\_function.html](http://brown.edu/Administration/Event_Planning/review/social_function.html)) prior to completing this Form.**

1. **Develop and submit an Event Management Plan**, including staff roles/responsibilities, space diagram, advertising plan, and protocols to ensure compliance with University policies. Detailed plan requirements, standard plans and templates available in the SAO or on our website: [www.brown.edu/Administration/Event\\_Planning/review/student.html](http://www.brown.edu/Administration/Event_Planning/review/student.html)
2. Functions must have 2 event coordinators (EC) plus AT LEAST the minimum number of social function managers (M) and bartenders (B), if applicable, outlined in the following scale:
 

1-100 guests: 2 EC, 3 M, 3 B	151-200 guests: 2 EC, 5 M, 5 B	301 + guests: Consult with SAO
101-150 guests: 2 EC, 4 M, 4 B	201-300 guests: 2 EC, 6 M, 6 B	(catered bar required)
- \*All Social Functions on **Wriston Quad** must have AT LEAST 6 social function managers to properly cover this venue.
3. **All event coordinators, social function managers and bartenders must be certified.** Certification trainings are held Thursdays at 12 PM in Petteruti Lounge.
4. Event Coordinators and social function managers are held responsible for: a) Proper conduct at the event; b) Clean-up and closing of the space, and any damage to University property; c) Cooperation with University staff (e.g. Public Safety, etc.); d) Observing the rules of the University (e.g. closing time, social function regulations, etc.)
5. **EVENT COORDINATORS AND SOCIAL FUNCTION MANAGERS ARE RESPONSIBLE FOR THE ENTIRE EVENT AND THEREFORE ARE PROHIBITED FROM DRINKING BEFORE OR DURING THE EVENT. Bartenders** are not allowed to drink before the event and up until they have completed their **final duties during the event.**
6. **Alcohol must always be attended. No self-service!** Alcohol above 80 proof, keg beer, beer balls, large containers of alcohol, Jell-o shots, bottled beer, and drinking games are prohibited. Punch must be clearly labeled.
7. The amount of alcohol present sends a very clear message about the nature of the event; think carefully about the amount of alcohol present and its impact on safety and liability concerns. BYO is NOT permitted.
8. You must provide and clearly display an adequate supply of non-alcoholic beverages and food whenever alcohol is served. Materials may not promote alcohol or drunkenness as the focus of the event. Advertising and event plans should indicate that "Intoxicated individuals will not be admitted."
9. If alcohol is being served and any money will be collected at the event for any reason: **YOU NEED A CLASS F LICENSE AND AN ENTERTAINMENT LICENSE PROVIDED BY CITY HALL.** You must apply for both at least **10 business days in advance of your event.** Applications must be obtained in the SAO. The application must be taken down to City Hall, with your payment (check or money order ONLY) to room 101. City Hall will schedule a hearing in room 112 for your case during the following week. Fees are: Class F full bar = \$35, Class F beer/wine ONLY = \$15, Entertainment = \$10.

Date of Event: M T W Th F Sa Su \_\_\_\_ / \_\_\_\_ / 20 \_\_\_\_ Sponsoring Group: \_\_\_\_\_

The Purpose of the event is \_\_\_\_\_

Type of Alcohol Service:  None  Caterer  Sponsoring Group Anticipated 21+ Attendance: \_\_\_\_\_

Type(s) of Alcohol:  None  Beer  Wine  Other Fee Structure: \$ \_\_\_\_ at the door; \$ \_\_\_\_ per drink

Please list the names of your certified social function managers: \_\_\_\_\_

Please list the names of your certified bartenders: \_\_\_\_\_

**Your signature on this form indicates that you have read and understand the regulations governing social functions at Brown, that you have reviewed your management plan with the SAO, and that you and the other managers and coordinators assume full responsibility for ensuring compliance with these and all other applicable regulations.**

Signature (of one of the coordinators): \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_