

GEORGIA SOUTHERN UNIVERSITY
ALCOHOL SERVICE PERMIT

Name of department, group, or organization requesting permit (required):

Description of event (all information is required – attach additional page if necessary):

Date of event: _____ Location of event: _____ Event begins: _____ Ends: _____

Number of attendees expected: _____

Will persons under 21 years of age be permitted to attend? _____

Alcoholic beverages to be served: _____

Food to be served: _____

Person acting on behalf of requestor (required):

Signature Print name

Person responsible for compliance with policy (required – must be University employee):

Signature Print name

By signing this form, I affirm that I have read the Georgia Southern University Policy on Events with Alcohol Service and associated guidelines in their entirety and understand them. I agree that I will personally be in attendance at the event from beginning to end and will be responsible to see that the policy is not violated. I agree that I will not use any alcohol during the event.

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When signed by the appropriate Vice President or person designated by the Vice President, a copy of this form shall constitute written permission for the above campus organization or department to serve alcohol in accordance with the description of the event written above, all relevant policies of Georgia Southern University including the Policy on Events with Alcohol Service, and any special restrictions imposed.

Signature Date

Special Restrictions: _____

Copies to:
University Police Department
Food Services – Catering
Vice President for requesting organization or department

