



OFFICE OF STUDENT INVOLVEMENT
STUDENT ORGANIZATIONS HANDBOOK

FOOD & BEVERAGE REGISTRATION FORM

Complete this form whenever you plan a Drury University event that will include serving or selling food and beverages. This form is designed to provide information regarding food safety guidelines in preparation and service of food and beverages on the Drury University campus.

Drury University does not traditionally regulate or monitor the use of food & a beverage used during student organization events, but does retain the right to regulate all activities held on its property and within the facilities. Based on the nature of the event, your student organization may be required to contact Aladdin Food Services to provide the food and beverages for the event. If an off-campus vendor is used for the food preparation, your organization is also be required to complete a Commercial Activity Contract. If your event is on campus, you will need to reserve your room or facility using the Campus Space Reservation Form.

Student Organization: _____
 Contact Person: _____
 Phone: _____
 E-mail: _____

Campus Advisor: _____
 Campus Advisor Phone: _____
 Campus Advisor E-mail: _____

Campus Advisor Statement of Responsibility:	I have read the policies and guidelines relating to this event and will assist the student organization with compliance. I approve this event and agree to assist this organization with the food & beverage responsibilities:
Campus Advisor Signature:	

Event Day & Date: _____
 Event Time & Duration: _____
 Event Location: _____
 Location Address: _____

Event Description:

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you plan on using Aladdin Catering Services?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	How do you plan on providing the food & beverages for this event?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are you collecting a fee for this event?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the food & beverage being donated to your group?

Estimated number of guests: _____
 Name of food & beverage provider: _____
 Who is this event for? **Drury Community** **Off-campus community** **Both**

I have reviewed the food & beverage guidelines and will incorporate the guidelines into this event. I agree that our event will comply with all policies, guidelines, and laws. I understand that incomplete/false information could limit future events and result in disciplinary action. I understand that my student organization assumes all liability and risk associated with this event. Regardless of the original intent, student organizations must understand that the event may be dispersed to ensure the continued safety of Drury Students.

I certify that the information listed above is true. My signature verifies that I agree to and will comply with the previous statements.

Student Organization Authorized Signature	Date of Signature	Printed Name of Authorized Student Organization Representative
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