



OFFICE OF STUDENT INVOLVEMENT
STUDENT ORGANIZATIONS HANDBOOK

EVENT PARTICIPANT BEHAVIOR CONTRACT

This form is required for all student organization events that require performance-type participation from Drury University students. It should be completed by all participants before the event and submitted to the Office of Student Involvement by the student organization event coordinator.

On behalf of the student organization, the Office of Student Involvement at Drury University, and the benefiting organization, thank you for agreeing to be a participant in this fundraising and/or philanthropy event.

Student Organization:

Benefiting Organization:

Event Name:

Event Date:

As a participant in a Drury University Student Organization event:

I understand that my choices in dress, behavior, performance, and/or attitude reflect the host student organization of this fundraising and/or philanthropy event and my choices have an impact on the future of this tradition on the Drury University campus.

I will not be under the influence of ANY substance (alcohol or drugs) before or during the event, and I will not expose myself in any inappropriate way during the event.

I will not be destructive in anyway to crowd, the university property, or myself during the event. I understand that if damages occur during my participation or performance or if I somehow become injured during the event, I agree to personally pay for the entirety of the damage and I will not hold the student organization, Drury University, or the benefiting organization or philanthropy responsible for my professional care.

I understand I will be asked to leave or removed from the venue site immediately if I am unable to fulfill these obligations. If I am asked to leave or am removed from this event, I understand that I will be attending future meetings with Drury University personnel to further review my behavior.

My signature on this form verifies that I agree to the previous statements and will comply with any action deemed necessary by the host student organization and the Office of Student Involvement.

Participant Signature:

Participant Printed Name:

Date:

OFFICE OF STUDENT INVOLVEMENT USE ONLY:

Date Received:

Follow-up Meeting:
