

OREGON STATE UNIVERSITY

REGISTRATION FOR SERVICE OF ALCOHOLIC BEVERAGES AT UNIVERSITY EVENTS IS REQUIRED

(See Oregon Administrative Rules OAR 576-60-010 to 40 for more information on complete policy.)

QUESTIONS SHOULD BE DIRECTED TO OSU OFFICE OF RISK MANAGEMENT, 541-737-7252

<http://risk.oregonstate.edu> or email risk@oregonstate.edu.

THIS FORM IS TO BE COMPLETED BY THE PARTY HOSTING THE EVENT.

IT IS NOT THE RESPONSIBILITY OF THE ALCOHOL SERVER OR CATERER TO COMPLETE FORM.

Application Date: _____ Date of Event: _____ Time: _____

Event Description: _____ Estimated Attendance: _____
(Please include # of minors)

Department/Sponsor Hosting Event: _____

Responsible Person: _____ email: _____

Address: _____ Phone: _____

REGISTRATION FOR SERVICE AT PREAPPROVED LOCATIONS*

Place: Reser Stadium and Parking Lots Peavy Lodge LaSells Stewart Center
 Valley Football Cntr End Zone (3rd Floor) MU East Int'l Forum Ag Experiment Stations
 CH2M HILL Alumni Center President's Residence * _____

*Service at other locations will be forwarded to the Director of Business Services for approval.

PUBLIC FUNDS CANNOT BE USED FOR PURCHASE OF ALCOHOL.

LICENSED ESTABLISHMENT SERVING ALCOHOL **: _____

Contact Person: _____ email: _____

Address: _____ Phone: _____

Currently on approved list? Yes No , please refer to <http://risk.oregonstate.edu> for guidelines.

**OAR 576-060 requires Food and Non-Alcoholic Beverages be provided at all events where alcohol is served. If above server is NOT providing the food and non-alcoholic beverages, please indicate caterer below.

FOOD/NON-ALCOHOLIC BEVERAGE PROVIDER: _____

RETURN COMPLETED FORM WHEN CATERER IS CONFIRMED TO:

OSU Risk Management
644 SW 13th Street
Corvallis, OR 97333-4239
Ph: (541) 737-7252 / Fax: (541) 737-5546
Email: risk@oregonstate.edu

OFFICE USE ONLY: APPROVED: _____ DATE: _____