

ALCOHOL USE REQUEST
Community Individual/Private Organizations

Client : _____ Request Date: _____

Contact: _____ Contact Phone: _____

Event Title: _____ Event Date: _____

Event Time: _____ pm / _____ pm Event No: _____

Event Location: _____

Attending: () Organization Members Only
() Organization Members and Invited Guests
() General Public

Alcoholic beverages being served: () Beer () Wine () Distilled Spirits

Host Bar: () Yes () No Cash Bar: () Yes () No

Will persons under lawful drinking age be in attendance? () Yes () No

I hereby agree to ensure compliance with all applicable State Laws, TABC Guidelines and UNT Policy on alcohol use. I further understand that I and/or the entity that I represent may be held liable for any damages to UNT property occurring from this event.

Name (print): _____

Address: _____ City _____ State _____

Phone: Residence () _____ Work () _____

Signed: _____

.....

() Denied () Approved Signed: _____ Date: _____
Department Director

Return completed form to Event Planning & Scheduling Services, University Union RM 418
P.O.Box 310710, Denton, Tx. 76203, Fax: (940) 369-5476
UniveristyUnion.SchedulingOffice@unt.edu
Distribution by Event Planning & Scheduling Services: Police Department, Risk Management, Building
Representative, Applicant