



# MONTANA STATE UNIVERSITY NORTHERN

## REQUEST FOR ALCOHOLIC BEVERAGE SERVICE

Date of Request \_\_\_\_\_

### REQUESTER INFORMATION

Name of Event \_\_\_\_\_

Date of Event \_\_\_\_\_ Time of Event \_\_\_\_\_ Number Attending \_\_\_\_\_

Campus Location of Event \_\_\_\_\_

Organization \_\_\_\_\_ Phone \_\_\_\_\_

Organization Contact \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

### VENDOR INFORMATION

Name of Licensed Vendor \_\_\_\_\_ Permit # \_\_\_\_\_

Food Provided per State Code (Reference) \_\_\_\_\_

Underage Monitoring per State Code (Reference) \_\_\_\_\_

\_\_\_\_ (Initial) It is the Vendor's responsibility to bus/clear/clean tables at the event of single use containers purchased from their establishment. i.e.: empty beer cans/bottles, bottle caps and can tabs, cups for drinks, stir sticks, serving napkins, etc.

The MSU-Northern catering staff are not allowed to remove any containers or get alcoholic beverages from the vendor per catering service policy.

*Compliance with state regulations is the sole responsibility of the licensed vendor listed above. The vendor hereby agrees to abide by these regulations while on MSU-Northern's campus.*

\_\_\_\_\_  
Name (Print) Signature Date

### AUTHORIZATION

I hereby request permission for alcoholic beverages to be served at the above event. I verify that I (or my designee) will be present and sober for the entirety of the event.

\_\_\_\_\_  
Name (Print) Signature Date

### OFFICE USE ONLY

Approved \_\_\_\_ Disapproved \_\_\_\_

\_\_\_\_\_  
Authorized Building Supervisor (Print) Signature Date

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Approved \_\_\_\_ Disapproved \_\_\_\_

\_\_\_\_\_  
Chancellor, Montana State University-Northern Date