

REQUEST FOR SERVICE OF ALCOHOLIC BEVERAGES

AT CLOSED, CATERED PURDUE UNIVERSITY EVENT

REQUEST FOR ALCOHOL SERVICES SHOULD BE MADE AT LEAST 30 DAYS IN ADVANCE OF THE EVENT DATE

1. Name of Event: _____
2. Date of Event: Day: _____ Date: _____
3. Location of Event: Building: _____ Room/#: _____ Number Attending: _____
Event Start Time: _____ am/pm Event End Time: _____ am/pm
Bar Start Time: _____ am/pm Bar End Time: _____ am/pm
4. Type of Event: Meal, Cocktail Reception, Dance, Other (*please explain*)

5. Name of Sponsoring Organization: _____
Billing Address of Sponsoring Organization: _____
Phone Number of Sponsoring Organization: _____
6. Name of Person Responsible: _____
Title: _____
Relationship to Sponsoring Organization: _____
Primary Phone Number: _____
Email Address: _____
7. Description of alcohol service requested (i.e. Cash Bar, Host-Bar—Beer, Wine Spirits, Timeframe, etc.)

8. Will anyone under the age of 21 be attending this event? Yes / No
If yes, please explain: _____
9. Will you certify that over 50% of those who attend the event will be over 21 years of age or older? Yes / No
10. Will you certify that the proposed event is a "closed, catered event" and is not open to the general public and that each person in attendance has either been personally invited or has purchased a ticket in advance? Yes / No
11. Will you agree to ensure that food and non-alcoholic beverages are available to participants at all times that alcohol is being served? Yes / No Catered by: _____
12. Will you agree not to use the name of any alcohol product, manufacturer or distributor in announcing or promoting this event and not to use any term or phrase which might convey that the consumption of alcohol is a major focus of this event? Yes / No
13. **For Purdue University units and departments, payment must be made with a PRF credit card and must be on file with the Event Office prior to the event. All bar and bartender fees will be included unless otherwise indicated. Contact the Event Planner with the card information. Recognized student organizations must pay by approved check, credit card, or money order.**

REMINDER: UNIVERSITY GENERAL FUNDS & STUDENTS ORGANIZATION FUNDS MAY NOT BE USED FOR ALCOHOL PURCHASES

A/R # _____ Fund # _____ GL Account # _____
Cost Center # _____ Internal Order # _____

14. Please list the person's name that will be present throughout the entire event who will be the sole contact person for your organization.

This person must identify himself/herself to the PMU staff person present at the start of the event.

The above individual will have the responsibility to communicate with event participants on any issues relating to alcoholic beverages consumption.

15. By my signature below, I certify that I am an official representative of the unit or organization sponsoring this event and that I am authorized to enter into this agreement. My signature also certifies that I agree to comply with all University policies, rules and regulations, as well as all state statues and that I agree to bear the cost of personnel necessary to comply with any of the above. The University reserves the right to immediately terminate alcohol service at said event, with the sponsoring organization remaining responsible for the costs associated with the event as planned. I understand that Purdue university reserves the right to limit quantities of alcoholic beverages served at an approved event, to limit sale of alcoholic beverages to any organization, group or individual at any time and for any reason deemed appropriate by the University and its agents. That decision is discretionary and lies wholly with Purdue University, subject to its best interests as it determines them.

Signature of Person Responsible for Event **X** _____ Date _____

(Note: The above signature must be from the same individual listed in item #6 on this request)

When completed and signed, you may email the request form to your Event Planner, or Fax (765) 494-8851, or mail the completed request to:

Purdue Memorial Union
C/o Your Event Planner
Catering & Events Office
101 North Grant Street, Room 160
West Lafayette, IN 47906

Request for alcohol service should be made at least 30 days in advance of event date.

REMEMBER TO ATTACH: *Choice Sheet*

Signed Responsible Alcohol Service Commitment

(For office use only)

Approved: _____ Date _____
(Director, Event Management)

Approved: _____ Date _____
(Associate Director, Catering)



RESPONSIBLE ALCOHOL SERVICE COMMITMENT

We are committed to providing a safe and secure environment where guests can enjoy alcohol in a responsible manner. Licensed and regulated by the State of Indiana, we will comply with all laws governing the sales and service of alcoholic beverages as well as the policies of Purdue University.

Please initial each item below to indicate your partnership with us in providing an enjoyable and safe experience for your guests.

- ___ The “carry-in” or “carry-out” of any type of alcoholic beverages is prohibited. Please make alternative arrangements for any alcoholic beverages traveling with you or your guests prior to entering our facilities.
- ___ Beverage service is limited to a total of **four (4) hours**. We're happy to accommodate one service time adjustment (no less than 30 minutes) during the event when possible; however, beginning service earlier than contracted may result in ending service earlier than contracted. All bars close 30 minutes prior to event end time.
- ___ Straight shots of any liquor or any combination of three (3) or more liquors will not be served.
- ___ No one person may leave the bar with or be in possession of more than two (2) alcoholic drinks at any given time.
- ___ No one person may leave the bar with more than the equivalent of one (1) alcoholic drink during the final hour of a four(4) hour bar service.
- ___ Neither last call nor suspension of bar service will be announced.
- ___ Signage will be posted at each bar briefly outlining our Alcohol Service Policies.
- ___ Alcoholic beverages may not be removed from the event space.
- ___ All individuals purchasing and/or consuming alcoholic beverages must be a minimum of twenty-one (21) years of age. Per Indiana State Law, individuals under 21 are not allowed in the bar even to purchase non-alcoholic beverages.
- ___ A valid ID is required for service. Anyone appearing under the age of 30 will be asked to provide identification **every time** they come to the bar.
- ___ Guests will be expected to maintain responsible standards concerning their use of alcoholic beverages. Excessive use leading to intoxication, offensive behavior, or disorderly conduct will result in the discontinuation of service (being “**Cut-off**”) to that individual and possible removal from the event.
- ___ For the safety of your guests and in accordance with the State of Indiana Liquor Laws, we reserve the right to remove from the event space:
- Any underage person who is consuming alcohol
 - Any person who provides an alcoholic beverage to an underage person
 - Any person who continues consuming alcohol after service has been discontinued “**cut-off**”
 - Any person who knowingly provides an alcoholic beverage to a person to whom service has been discontinued “**cut-off**”
 - Any person who arrives visibly intoxicated to the event
- ___ An off-duty police officer in plain clothes (*dress casual*) may be required by Purdue Memorial Union Catering & Events to assist us in our commitment to providing a safe, secure, and enjoyable event. All expenses will be the responsibility of the customer.

Multiple infractions of any liquor service or law will result in the discontinuation of all alcohol service for the remainder of the event. Should this actin become necessary, payment for the event will remain due in full and no refund will be given for the unused beverage service time or any inconvenience or embarrassment caused.

In order to allow you to enjoy your day to the fullest, we ask that you identify two (2) other contacts that can assist us in reminding your guest to our responsible service policies should it become necessary and you are otherwise engaged. Your Catering Coordinator will be introduced to these contacts at the beginning of your event.

X _____
Signature of Person(s) Responsible / Date

X _____
Signature of PMU Event Planner / Date

ALCOHOL CHOICE SHEET

Request for alcohol services should be made at least 30 days in advance of the event date. Licensed and regulated by the State of Indiana, service will comply with all laws governing the sale and service of alcoholic beverages.

Please return this completed form along with the Request and the Service Commitment forms.

Event Name: _____ Date: _____ Time: _____

PMU Event Planner: _____ BEO#: _____ # of People: _____



DOMESTIC BEER

(Please select two)

- Bud Light
 Coors Light
 Miller Light

PREMIUM BEER

(Please select two)

- Corona
 Heineken
 Sam Adams
 People's Moundbuilder IPA
 People's Mr. Brown
 People's Farmers Daughter

WINES

(Please select one tier)

- House** *(Chardonnay, Moscato, Merlot, Cabernet Sauvignon)*
 Deluxe *(Chardonnay, Pinot Grigio, Merlot, Cabernet Sauvignon)*
 Elite

Elite Whites (Please select two)

- Chardonnay
 Riesling
 Sauvignon Blanc
 Pinot Grigio

Elite Reds (Please select two)

- Pinot Noir
 Malbec
 Merlot
 Cabernet Sauvignon
 Shiraz
 Zinfandel

SPIRITS

- | | | |
|---------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> HOUSE | <input type="checkbox"/> DELUXE | <input type="checkbox"/> ELITE |
| Bourbon | Burbon | Burbon |
| Gin | Gin | Dark Rum |
| Rum | Rum | Gin |
| Scotch | Scotch Spiced Run | Rum |
| Tequila | Scotch | Scotch Spiced Run |
| Whiskey | Tequila | Scotch |
| | Whisky | Tequila |