IFC/Panhellenic Third Party Vendor Responsibility Form

This completed form must be submitted for IFC/Panhellenic at the Office of Student Development 1 business day prior to the event attached to the Event Registration Form.

Date of Event: _______________  Start Time: _________________  End Time: _____________

Location: ______________________________________________________________________

Sponsoring Chapter(s):  ___________________________________________________________

Name of Third Party Vendor:  ______________________________________________________

By signing this form the above third party vendor is agreeing to the following terms in writing:

1. I have given the sponsoring chapter(s) proof of insurance with a minimum of $1,000,000.00 of general liability insurance, evidenced by a copy of a properly completed certificate of insurance prepared by the insurance provider.
   • This certificate also shows that the insurance coverage maintains “off premises liquor liability and non-owned and hired auto coverage.
   • This certificate also shows that the vendor has added the sponsor(s), alumni corporation(s), and national organization(s) as “additional insured” or “named insured” on their insurance coverage for the date of the event.

2. I agree to CASH ONLY sales collected by myself, the vendor, during the entire function.

3. I assume all responsibilities that any other purveyor of alcoholic beverages would assume in the normal course of business including the following:
   1. That vendor will check identification cards upon entry;
   2. That vendor will refuse service of alcoholic beverages to minors;
   3. That vendor will refuse service to individuals who appear intoxicated;
   4. That vendor will maintain absolute control of all alcoholic containers present; and
   5. That vendor will collect all remaining alcohol at the end of the event, and remove it from the premises. Vendor must also agree that no excess alcohol -- opened or unopened -- will be given, sold or furnished to the event sponsor(s).

Third Party Vendor:

Print Name: _____________________  Signature: _______________________  Date: ___________