

Enrolment Services

0040 – 1874 East Mall Vancouver, BC Canada V6T 1Z1 Phone 604 827 1981 www.students.ubc.ca

REQUEST FOR UNIVERSITY PERMISSION TO HOLD A FUNCTION WHERE ALCOHOL WILL BE SERVED

The Organizer of the function should complete Sections 1 and 2 and then obtain authorization as required in Section 3 from the department/ faculty/residence where the event is to take place.

Once authorized, email the form to Scheduling Services (room.bookings@ubc.ca) at least 30 days before the event date for verification of authorizing signature(s) and attendance expected for the function where alcohol is to be served (Section 4).

All AMS-constituted student organizations holding on-campus events where alcohol will be served are required to submit a copy of the event's Special Event Permit (SEP) to the AMS Student Bookings Representative in the Nest 3500.

Organizer	
Organization:	Organizer (print name):
Address:	City:
Postal Code:	Email:
Contact tel:	Business:
I represent an organization that has organized and meet regularly or occasionally for a common purpose. I certify that the above-noted function is consistent wit the purposes of the University and that I have addresse all items on the Organizer's Checklist following this application. I am in possession of a Responsible Beverage Service certificate and I accept responsibility for the conduct of visitors and guests at this function.	Liquor Control and Licensing Branch to assess fines for failure to enforce my legal responsibilities as the event host. I acknowledge that any fines imposed by the BC Liquor Control and Licensing Branch for SEP contraventions at my event will be my responsibility if the Organization is not a legal entity. I acknowledge that there will be no underage attendees admitted to
	Signature:
2. Room information	
Function:	Date of function:
Building:	Room number or name:
Attendance expected:	
Event Room Capacity:	Time alcohol to be served:
applicable, the Head/Manager of the Department where On behalf of the University of British Columbia, I give perm University premises identified above. This permission is co the obtaining of a Special Event Permit pursuant to the Liqu	Residence Life Manager (RLM) of the Faculty/Unit/Residence and, where the event is to be held. ission to the above-named organizer to hold the above-noted function on the inditional upon compliance with all applicable legislation (including upon Control and Licensing Act), all University policies and procedures (Including University Events or on University Premises"), and all items in the Organizer's
Dean/Director/RLM:	Faculty/Unit/Residence:
Signature:	Date:
Head/Manager (if applicable):	Department:
Signature:	Date:
4. Scheduling Services	
Above Signatures Confirmed by:	Date:
100+ attendees: Safety and Emergency Response Plan atta	ached Copy of Responsible Beverage Service Certificate and Gov't ID attached