Office of Campus Life Party Registration Form

OFFICE OF CAMPUS LIFE 8AM-5PM

5.) Be prepared to call security to ask for assistance if needed.

THE PARTY:

6.) Complete a walk-through to clean up the space following the party

207-859-4280

CAMPUS.LIFE@COLBY.EDU

Parties with **alcohol** require a Host who has participated in host training/met with a campus life staff member. Students wishing to host a party in their room/apartment must complete this form and turn in to the Office of Campus Life by **Thursday at noon.** the week of the event.

Host (if serving alcohol, the host must be 21):		Hall and Room #:				
TODAYS DATE:	DAY ANI	DAY AND DATE OF PARTY:				
ESTIMATED ATTENDANCE:	(invitation	ns and attendance should n	ot exceed what	your room/apartment can i	reasonably hold)	
START TIME:	Party guests must leave and music turned down at 1:00am					
AMOUNT AND TYPE OF ALCOH	(OL:					
FOOD and SNACKS (required):			***************************************			
NON-ALCOHOLIC BEVERAGES	(required):		<u></u>			
Please note any additional considera	ıtions: (ie themed	d party, decorations, light	ts, DJ, etc):			
	esult of the party.	Residence Hall &	Room	Host/?	——————————————————————————————————————	
APPROVAL						
CAMPUS LIFE:				DATE		
Pleas	e use the followir	ng checklist and review C	olby College al	lcohol policies		
		Party Checklis	<u>st</u>			
 Plan how you will invite/lim Complete the Registered Par Buy food and drinks for your 	ty Form and verify revent	y approval:				

7.) Pick up all trash in your party space, including routes of access. CLEAN UP MUST BE COMPLETED IMMEDIATELY AFTER