

**PRIVATE EVENT REGISTRATION
LEVERETT HOUSE**

Instructions: Please fully complete and submit this form to the Resident Dean's Office by **Thursday at 3pm** for events on Friday or Saturday. Please note that host(s) must meet with their Resident Dean or designee prior to any private event to review safety and security issues.

PART I – HOST INFORMATION

Host(s) and other Members of the Suite (all suite members must sign)					
Host(s) are responsible for checking IDs and monitoring the activities of guests, with the objective of promoting compliance with these guidelines, Harvard College policy, and Massachusetts law <i>(Note: For events where alcohol is to be served, hosts are required to be at least 21 years old and must be residents of the suite.)</i>					
First & Last Name	Host Yes/No	Signature	Date of Birth	Cell Phone Number	I have read and understand the alcohol-related policies.
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes
					<input type="checkbox"/> Yes

PART II – EVENT DETAILS

Event Date:	Location:
Start Time:	End Time <i>(no later than 2:00 a.m.)</i> :
Number of Expected Attendees:	Alcohol Available: <input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Alcohol <i>(if applicable)</i> : <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Liquor	
Alcohol Delivered <i>(if applicable)</i> : <input type="checkbox"/> Yes <input type="checkbox"/> No	Date and Time of Delivery <i>(if applicable)</i> :
Detailed Description of Food and Alternate Beverages Available:	

PART III – RESIDENT TUTOR & RESIDENT DEAN REVIEW

Prior to hosting a party, student host(s) must meet with the Entryway Tutor and the Resident Dean to discuss plans for the event and to obtain approval.

Entryway Tutor Signature: _____ Date: _____

Resident Dean or Designee Signature: _____ Date: _____