

**Interfraternity & Panhellenic Council
Philanthropy Registration Form
Drake University**

Chapter Name: _____ Chapter President: _____

Chapter Philanthropy Chair(s): _____

Contact Email: _____ Contact Phone Number: _____

Committee Members: _____

Title of Event/Activity: _____

Organization the event is benefiting: _____

Date(s) of the Event: _____

Approximate Start Time: _____ Approximate End Time: _____

Number of People Attending: _____ Amount Charging for the Event: _____

Co-Sponsoring Chapter or Organization (if applicable): _____

Name of Contact in Alternate Organization: _____

Contact Email/Phone Number: _____

How does this event promote the mission and purpose of your organization?

Provide a brief description of the event/activity that you are planning. Please include the organization/cause that proceeds will be donated to. This description will be used to promote the event.

Please list any sponsors that might be involved with your event, what services they are providing, and contact information.

What is your fundraising goal? _____

Will your organization be selling anything in the Olmsted Center Breezeway? (i.e. tickets, t-shirts, etc.)

If so, have you made a formal request through the Student Life Center to reserve a table in the Breezeway and the cash box? _____

Have you made arrangements with the Student Life Center to store any necessary materials needed for the week of your event/activity? (i.e. coins from Penny wars, extra t-shirts, etc.)

Please have the chapter President and Philanthropy Chair(s) read and sign this form.

I have read the above and believe all information is accurate to the best of my knowledge. As a chapter officer, I am aware that all chapter philanthropies are alcohol and substance free and that I will make every effort to ensure this policy is followed. I understand that my chapter will be held liable for any actions not in accordance with this policy and will be brought before the Panhellenic or Interfraternity Judiciary Board.

Date Pre-Event Planning/Registration form completed: _____

Signature of Philanthropy Chair(s):

Date

Signature of Chapter President:

Date

Please turn these forms and an attached flier/draft into the Student Life Offices no later than three weeks prior to the preferred date of the event. Please keep a copy of this form in your organization's history file.