



## Greek Wide Calendar Event Registration Form

This form must be completed and submitted by January 15<sup>th</sup> for Spring Philanthropy Events and April 30<sup>th</sup> for Fall Philanthropy Events. For any other events, this form must be completed and submitted seven (7) calendar days prior to the event. Email this form to [okstategwc@okstate.edu](mailto:okstategwc@okstate.edu) for all programming events. Events will be added to the Greek Wide Calendar on a first come, first served basis, and upon approval by an official from the Office of Fraternity & Sorority Affairs.

Today's Date:

Chapter Name:

Name or theme of the event:

Date(s) of the Event (preference order):

1st:

2nd:

3rd:

Time of the Event:

Location of the Event:

Which council members do you wish to have in attendance?

IFC

Panhellenic

NPHC

MGC

All

What activities does your event entail (ex: softball tournament, eating pancakes, etc.)?

Copy and paste any websites or social media that will be promoting your event (to be promoted on the calendar):

Is this event co-sponsored by another chapter, business, or others?      Yes      No

If yes, please list:

**\*\*Note: if more than one chapter is involved, both need to submit a form**

If event is a philanthropy event, please indicate which type.

Required

Non-required

Non-Panhellenic (sororities only)

Other

Who is the beneficiary of the proceeds from this event?

Is this event registered with your national organization?

Yes

No

**\*\*NOTE: Reserving a date and/or time on the Greek Wide Calendar does not guarantee that members of any of the four Greek Councils will attend your event. You are responsible for promoting your event through whatever means you deem necessary. We, the undersigned, affirm that the above listed social function will be in compliance with all Council, University, Local, State, and Federal guidelines. The event will also be in compliance with the risk management policy of the above named organization. All three SIGNATURES must be present.**

Name of person submitting form:

Phone Number:

Signature of Organization President:

Signature of Event Chair (could be Social, Philanthropy, etc.)

Signature of Risk Management Chair