



POLICIES AND GUIDELINES

Special Events sponsored by Chapters, Districts, and Regions are covered under the General Liability policy provided by Alpha Phi Alpha Fraternity, Inc.®. If any event other than a regular business and/or chapter meeting is held, the **Special Event Checklist** application must be completed and submitted to the Corporate Headquarters for approval **(21) twenty-one days prior the event date**. Failure to submit the checklist within the deadline will result in a **\$100 late fee** to be applied to the chapter account. **ALL EVENTS** require the written approval of the Corporate Headquarters in the form of the Event Certificate before they are held by the chapter. In the event the Corporate Headquarters determines the potential liability exposure of the event is too extreme, the chapter will be asked to purchase a separate liability policy for the event or pay a surcharge for the coverage under the Alpha Phi Alpha Fraternity, Inc.® insurance program. **You will receive your insurance certificate approximately 7-10 business days before the event date listed.**

If a Special Event Checklist is not completed and approved by the Corporate Headquarters:

- the Fraternity's Insurance Policy will not extend to cover the event, meaning the chapter and individuals will be held liable should an incident occur,
- the chapter will be fined \$1,000,
- and additional fraternal sanctions may be placed on the chapter.

PLEASE ENTER THE FOLLOWING INFORMATION:

Chapter Name: _____ KEY #: _____

Chapter Type: ALUMNI COLLEGE

Region: EASTERN MIDWEST SOUTHERN SOUTHWEST WESTERN

District: _____ District Director: _____

Type of Event: _____ Event Date: _____

Title of Event: _____

Location/Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____

Contact Number: _____ Contact Email: _____

Estimated Attendance: _____

Has the event been held in the past? Yes No How many times prior? _____

Have there been any previous claims or violations? Yes No

If yes, please provide further details: _____

PLEASE SEE PAGE (4) FOR EVENT SECURITY REQUIREMENTS BASED ON ATTENDANCE.

EVENT DESCRIPTION:

CO-SPONSOR INFORMATION:

Is there a co-sponsor? Yes No Not Applicable

If yes, please list the organization: _____

Organization Contact Email: _____

Does the co-sponsor have insurance coverage? Yes No Not Applicable



ADDITIONAL INSURED

Entities requiring additional insurance coverage may be added to this policy. Such entities may be your, college, university and/or proprietor from whom the chapter may be renting property to host an event. **Additional insured certificates and endorsements take up to 5-7 business days to complete.** Please complete the information below:

PLEASE ENTER THE FOLLOWING INFORMATION:

Company Name: _____
 Location/Address: _____
 City: _____ State: _____ Zip: _____
 Contact Person: _____
 Contact Number: _____ Contact Email: _____
 Venue Type: Club/Lounge/Night Spot Private Club Catering Venue/Banquet Hall
 Sports Facility University/School Facility Conference Center Religious Venue
 Museum Other If other, please list: _____

Please answer the below questions. If answered "yes," please include the proper documentation when submitting this checklist. **Please note all insurance documents from vendors need to be provided when submitting the checklist.**

Have any written contracts or agreements been signed for any part of the special event?

Yes No Not Applicable

Have you obtained certificates of insurance from the following vendors:

Venue: Yes No Not Applicable

Catering: Yes No Not Applicable

DJ/Band/Entertainment Yes No Not Applicable

Security: Yes No Not Applicable

Transportation: Yes No Not Applicable

Other: Yes No Not Applicable

If yes, please list: _____

Is the chapter named as an additional insured on all certificates from vendors?

Yes No Not Applicable

Have you received any correspondence requesting proof of insurance for the event?

Yes No Not Applicable

Does the event require applicable permits and/or permission to be held?

Yes No Not Applicable

If yes, has the documentation been obtained?

Yes No

Are you obtaining a third-party promoter for the event?

Yes No Not Applicable

If yes, please provide the following information:

Contact Name: _____

Contact Phone Number: _____

Contact E-Mail: _____

Have you obtained proof of liability coverage? Yes No

Are you listed as an additional insured under the third-party contract? Yes No



ALCOHOL

The possession, use, and consumption of alcohol during events sponsored, endorsed, hosted, or observed by Fraternity must follow all applicable laws of the state, province, county, city, town, institution, or other controlling entity and **must be facilitated through a Third-Party Vendor (TPV) system or advertised as Bring Your Own Beverage (BYOB).**

THIRD-PARTY VENDOR GUIDELINES

The Chapter and/or Third-Party Vendor (TPV) must agree to, in writing, all the responsibilities that any other purveyor of alcoholic beverages would assume in the normal course of business, including but not limited to:

- Checking ID cards upon entity
- Not serving minors
- Not serving individuals who appear to be intoxicated
- Maintaining obsolete control of all alcoholic containers present
- Prohibiting use of common containers for serving such as kegs, punch bowls, etc. unless supplied and managed by the TPV

GENERAL ALCOHOL GUIDELINES

- If the event is listed as “Bring Your Own Beverage (BYOB),” individual alcohol must be limited to no more than six (6) standard drinks (consisting of beer, cider, wine, etc.) for each person.
- Nonuse of Chapter treasury of the purchase and distribution of alcohol
- Not participating in “drinking games” or other activities that encourage excessive consumption of alcohol
- Not serving alcohol at informational seminars, IMDP activities and/or ritual ceremonies.
- Mature party monitors/chaperones must not partake in alcoholic beverages while fulfilling the role of chaperone at the hosted event.
- Possession, sale, distribution, and/or use of any illegal or prescription drugs not directly prescribed to the user at any Chapter venue, sponsored event, or event an observer would associate with the Fraternity is strictly prohibited.

Please answer the below questions. If answered “yes,” please include the proper documentation when submitting this checklist:

Has your vendor(s) provided proof of a liquor license and temporary license to sell on the premise where the function is being held? Yes No Not Applicable

 If yes, is the TPV insured with a minimum of one million dollars of general liability through their completed certificate of insurance? Yes No

Are there methods provided for designating minors? Yes No Not Applicable



SECURITY

GENERAL GUIDELINES

The Chapter must agree to, in writing, all security recommendations, including but not limited to, as outlined below:

- **All special events with alcohol must have security present**
- Must have at least one (1) security officer for every 100 guests.
- Must have at least one (1) sworn law enforcement or armed private security office for all special events with alcohol an estimated attendance of 100 guests or more.
- Formal special events with alcohol (i.e. balls, galas, and fundraisers) **do not** require security unless otherwise required by the host venue.

Please answer the below questions. If answered “yes,” please include the proper documentation when submitting this checklist:

Has your vendor(s) provided a certificate of insurance?

Yes No Not Applicable

What type of security is being used?

Public Police Private Police Security Team

SAFETY

GENERAL GUIDELINES

The Chapter must agree to, in writing, all safety regulations, including but not limited to, as outlined below:

- Must be chaperones at any Fraternity sponsored youth activity.
- Must have both male and female chaperones during co-ed youth events.
- Must use the rule of three (**two (2) adults and one (1) minor and/or two (2) minors and one (1) adult**) when supervising youth events.
- Emergency and guardian contact information must be provided before any youth participates in Fraternal activities.
- Volunteers must be checked through the National Sex Offender Website
- Volunteers must provide contact of three references that can speak to their engagement with youth.
- **If the event involves a sports activity (both youth and adult)**, the chapter must obtain an **Athletic Participation Waiver** for each individual engaging in the activity. The forms must be kept on file with the Chapter.



TRANSPORTATION

Whenever chapters or members are transporting special event attendees, **personal vehicles should not be used as they are not covered.** Chapters should be encouraged to engage a licensed third-party transportation vendor who will provide professional drivers. The transportation company assumes liability during the ride and removes the responsibility and risk from Alpha Phi Alpha Fraternity, Inc. **If a third-party transportation vendor is obtained, a certificate of insurance must be provided and submitted with the Special Event Checklist.** Transportation (taxi, Safe Rides, Sober Rides, etc.) outside of personal vehicle and/or third-party transportation vendor should be available for guests to request.

AUTHORIZING SIGNATURES

By signing the Special Event Checklist, the Chapter is complying and adhering to the guidelines presented within the form.

*President: _____
 Signature: _____ Date: _____

Treasurer: _____
 Signature: _____ Date: _____

Vice President: _____
 Signature: _____ Date: _____

Risk Management Officer: _____
 Signature: _____ Date: _____

*Event Chairman: _____
 Signature: _____ Date: _____

*Advisor (College Chapters Only): _____
 Signature: _____ Date: _____

***Required signatures for College Chapters. The checklist will not be accepted nor processed if all required signatures are not listed.**

Before submitting, please remember to include the following items:

- Any additional insured entities to be included on the policy
- Include ALL certificates of insurance from the participating vendors
- Collect Athletic Participation Waivers from attendees (if applicable)
- Include copy of flier/promotional materials for requested event
- Required signatures from chapter officers

The Special Event Checklist should be submitted to the Corporate Headquarters in PDF format and sent via email to insurance@apa1906.net or via fax at **410.554.0054 three weeks (21 days) prior to the event.** Failure to submit this form within the appropriate time frame will be subject to a **late processing fee of \$100** as well as result in the certificate not being processed in time for the time. **Forms received two (2) days before the event will not be processed.**

Please review the Insurance Manual on the National Website at www.apa1906.net for additional questions.



THINGS TO CONSIDER

When planning your event, please keep in mind the following measures for risk and injury prevention:

Is there a guest list being monitored at the door?

Yes No Not Applicable

Is there a centralized location for alcohol and food?

Yes No Not Applicable

Are food and non-alcoholic beverages available?

Yes No Not Applicable

Is there a policy on confiscating keys from intoxicated guests?

Yes No Not Applicable

Is possession of weapons being checked at the door?

Yes No Not Applicable

Are security personnel trained on preventing illegal drug use?

Yes No Not Applicable

Is security trained on preventing disorderly conduct/hazing?

Yes No Not Applicable

Is smoking permitted at the event?

Yes No Not Applicable

If yes, is there a designated smoking area?

Yes No Not Applicable

Has the event facility been inspected to ensure that it complies with applicable federal, state, and local safety and fire codes?

Yes No Not Applicable

Are guests informed of emergency evacuation routes?

Yes No Not Applicable

Is there one well-lit entrance that is controlled and monitored?

Yes No Not Applicable

Are security personnel trained on preventing sexual abuse and harassment?

Yes No Not Applicable