

## The Gardens -- Alcohol Beverage Request Form

Current Date:		<del></del>				
Event Date:		Event	_ Event Name:			
Contact Person:	:	TAMU/AgriLife Office:				
Phone: E-mail:						
Event type:	Reception	Tailgate	Banquet	Other (specify):		
Venue Informat	tion					
Venue Name: _	The Gardens at Tex	as A&M_				
Facility Contact:	: _Abbey Whipple_		Phone Number:	(979) 314-8019		
Alcohol Beverag	ge Service Infor	mation				
Alcohol Provide	er (must be an appr	oved vendor):				
Service Type: _	Open Bar	Cash Bar	Other (sp	ecify):		
Service Level:	Beer/Wine	Beer/W	ine/Call Liquor _	Beer/Wine/Premiu	m Liquor	
Time Bar Opens	::		Time Bar Clo	oses:		
Total guests:	Tot	tal guests <u>unde</u>	er 21:	Total guests <u>21 ar</u>	d over:	
How will the gu	ests under age 21 k	oe monitored s	o that they are no	ot consuming alcoholic be	everages?	
Food Service Inf	formation					
Caterer:		Contact Name: Phone:				
Food Menu:						
By signing below, I	certify that all the	information I	provided is corre	ect to the best of my know	vledge.	
Requested By: _			Signature:		Date:	
Facility Manage	r:		Signature:		Date:	
For on-campus eve	ents, please route t	o the Executiv	e Associate Vice	Chancellor.		
Executive Assoc	riate Vice Chancello	ır Signature:			Date:	