Build Party Registration Form  
Vanderbilt University  
Office of Greek Life  
Due two weeks prior to the event

Fraternity or Sorority: ________________________  Date of Event: ____________

Person responsible for Build Party(print): ________________________________

Name/theme of party: ________________________________________________

Time of event: From: ___________  To: ____________

Description of decorations planned: (attach a drawing if necessary)
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

The Fire Safety Policy states that all decorations within 6 feet of the house must be fire retardant. Please list the decoration materials that will be used in the house and within 6 feet of the house:
Note: The deck is considered part of the house
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

List decoration materials to be used 6 feet and further from the house:
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Please describe the fire safety precautions that are planned:
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

I understand that the Greek Advisor must approve these plans. Upon submitting this form, please schedule a meeting with Clayton Arrington.

_________________________________________  ____________________________
Signature of person responsible for Build Party  Date