



(For office purposes only)
Date Submitted: _____

Recruitment Event Information

Contact Information

Semester: _____

Fraternity Name: _____

President Name: _____

Phone: _____ E-mail: _____

Recruitment Chair Name: _____

Phone: _____ E-mail: _____

Event Information

Date of the Event: _____ **Event Start Time:** _____

Location of Event: _____

Address of Location: _____

Directions to Location: _____

(must attach map)

This document is NOT subject to change unless; the fraternity faces an extreme emergency. In such a case the president or the fraternity's rush chairman will contact the Greek Advisor and the IFC Rush Coordinator immediately. If the dates, times and locations are changed the fraternity is subject to fines set by the Greek Advisor and the IFC Executive Board.