



**UNIVERSITY OF WASHINGTON  
ALCOHOL GIFT/CONTRIBUTION REVIEW FORM**

**UW Event Host:**

\_\_\_\_\_ (Department name and mailbox number)

\_\_\_\_\_ (Name of applicant, email address, telephone number)

**Other Host (if applicable):**

\_\_\_\_\_ (Name of organization/company)

\_\_\_\_\_ (Name of contact person, email address, telephone number)

**Alcohol Industry Sponsor(s):**

\_\_\_\_\_ (Name of organization/company)

\_\_\_\_\_ (Name of contact person, email address, telephone number)

**Total Value of Contribution:**

\_\_\_\_\_ (Cash donation or estimated value of the services or product donated)

**Name of Event/Activity:**

\_\_\_\_\_ (Name, date, time and location)

**Description of the Event:**

\_\_\_\_\_  
\_\_\_\_\_

**Description of Alcohol Sponsor's Participation and/or Give-aways:**

\_\_\_\_\_  
\_\_\_\_\_

**Proposed Publicity:**

\_\_\_\_\_

**Will give-aways or publicity include the UW logo or seal?**  Y  N If yes, review by the UW Trademarks and Licensing Office is required. Applicant should call 206-685-8600.

Return completed form to the Office of Special Programs (Box 352230 or [sprogram@uw.edu](mailto:sprogram@uw.edu)). Approval or denial of the request will be communicated by email within two weeks after the receipt of this form.

Approved (Lincoln Johnson): \_\_\_\_\_  
Date:

Applicant Signature: \_\_\_\_\_  
Date: