

**Sawyer County Healthy Lifestyles  
Underage Alcohol Use**

**OBSERVATION FORM**

\_\_\_\_\_  
Reporter/observer name and phone number

\_\_\_\_\_  
Location

\_\_\_\_\_  
Event

\_\_\_\_\_  
Sponsor

\_\_\_\_\_  
Observation date

\_\_\_\_\_  
Time

Observe and record the following information

**CIRCLE ANSWERS...**

**Is this a smoke-free posted event?** Yes / No

**Is this a tobacco free event? (Other than ceremonial)** Yes / No

**Is there alcohol on the premise?** Yes / No

**Is alcohol?** For sale / Brought to the event

**Are ID's checked before alcohol is sold?** Yes / No

**Hours that alcohol is sold (i.e. 12-4pm)?** \_\_\_\_\_

**Is alcohol consumed in a designated area that is defined by a roped-off perimeter?** Yes / No

**Are people allowed to leave the designated area with alcoholic beverages?** Yes / No

**Is alcohol consumed in a non-designated area (without a defined perimeter)** Yes / No

**If so, where?** Parking lot / Bleachers / Other, specify \_\_\_\_\_

Notes \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*\*\*\* Return to Sawyer County Public Health \*\*\*\***

10610 Main Street • P.O. Box 730 • Hayward, WI 54843

715-634-4806 / 800-569-4162

Observation period:  
4/2007- 3/2008