



## **Campus Table Request Form**

Contact name:

Contact email:

Contact phone number:

Date:

Dates of event:

Times of event:

Purpose:

Organization (if applicable):

Event specifics (time, date, attendance):

Detailed schedule:

Contact [studentlife@lakemichigancollege.edu](mailto:studentlife@lakemichigancollege.edu)

Submit your event here: <https://lakemichigancollege.events.prod.coursedog.com/events/request/nEnI2VzEH5nb3pl5ZX7x>