

# Dining Table Tent Reservation Request

## GSU Café

Campus Department or Recognized Organization:

Contact Person:

Phone Number:

Email:

What Services, programs, and/or event(s) are you promoting?

Start Date to be Advertised - Must be a Saturday (Format: MM/DD/YYYY):

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Please submit completed form to [tlathus@arenafoodservice.com](mailto:tlathus@arenafoodservice.com) at least 7 days prior to the desired date for posting.

**For Office Use Only:**

Date Received: \_\_\_\_\_

Approved                  Denied

Authorized By: \_\_\_\_\_

Date: \_\_\_\_\_

Notification Sent By:

Email

Phone