

2017-2018 Meal Plan Application

Student Name:		Date:			
Meal Plan Information					
Please select the meal plan option(s) you would like for the sessions you are certain you will be attending.					
Fall 2017 Meal Pla		Period	Spring 2018 Meal Plan Period	Total Amount Due	
	Aug 16—Dec 16		January 9 —May II		
19 meals per week (only available for residents in student housing)	□ \$2200.00		□ \$2200.00	\$	
10 meals per week	□ \$1600.00		\$1600.00	\$	
There will be no meal service from in observance of the Thanksgiving Holiday nor will there be food service during Spring					
Break.					
Important Information:					
1) Meals offered are Monday - Friday: Breakfast, Lunch and Dinner and Saturday and Sunday: Brunch and Dinner unless otherwise					
noted. Saturday and Sunday meals are ONLY offered at the dormitories for residents only.					
2) Meal plans may be cancelled or altered, with the remaining amount refunded, , by September 5 th for Fall, January 31 st for					
Spring.					
3) Refunds are not given for unused meals and balances are not forwarded to subsequent meal plan periods. Unused meals do not roll					
over to the next week.					
4) Meals will be provided at the North American University Campus. However, brunch and dinner is served at the dormitories on					
Saturday and Sunday.					
5) Meal plans may be adjusted for a higher amount of meals. However, meal plan levels may not be lowered outside of the					
adjustment period. Only one adjustment is allowed per session.					
6) Cancellation of meal plans is not allowed outside of the cancellation period aforementioned unless a student has officially withdrawn					
from school. They will be awarded the remaining value of their meal plan and charged a \$50 cancellation fee. If a student withdraws					
before the beginning of their session, they are entitled to a full refund.					
7) Students are prohibited from sharing their IDs with other students.					
8) We recommend submitting all meal plan requests 2 weeks before a session begins to prevent disruption in the usage of the meal					
plan.					
9) By signing below, the student agrees to pay for the meal plan chosen above and agrees to the terms mentioned here. If the student					
does not pay the agreed amount, they may be barred from classes, records may be withheld and fines may be incurred.					
Student Signature:			Date:		
Office Use Only:					

Payment Received: Received By: Date: