

## 2015-2016 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 2015	Spring 2016	<b>Total Amount Due</b>	
	Meal Plan Peri			
	Aug 22 – Jan 1	January 5 – May 20		
19 meals per week (only available for residents in student housing)	□ \$1950.00	□ \$1950.00	\$	
15 meals per week	☐ Not Availab	le    Not Available	\$	
10 meals per week	□ \$1400.00	□ \$1400.00	\$	
There will be no meal service from Nov. 26th – 29th in observance of the Thanksgiving Holiday nor will there be food service during Spring Break, March 14 <sup>th</sup> - 18 <sup>th</sup> .				
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 August 29 for Fall and January 12 for				
Spring.				
3) Refunds are not given for unused meals and balances are not forwarded to subsequent meal plan periods.				
4) Meals will be provided at the North American University Campus. However, breakfast and dinner is also served at the				
dormitories to residents.				
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. All changes must be submitted in writing.				
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officially withdrawn from school.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 Rec'd:				
Rec'd By: Date:				