

## MEAL PLAN APPLICATION FOR STAFF AND FACULTY AT McMASTER UNIVERSITY

EMPLOYEE ID# \_\_\_\_\_

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

FACULTY/DEPT \_\_\_\_\_ CAMPUS ADDRESS \_\_\_\_\_

EXTENSION \_\_\_\_\_ E-MAIL \_\_\_\_\_

\* **First time applicant:** Please provide your "Birth Date" for on-line account access

BIRTH DATE    /   /     
MM / DD / YYYY

DEPOSIT: \_\_\_\_\_ (\$50 minimum)

**PAYMENT MADE BY:**

- PAYROLL** *(I authorize McMaster University to take the amount specified above as a one-time deduction from my payroll deposit and to apply that amount to my Hospitality Services Meal Card)*
- CASH / DEBIT** In Person ONLY
- CHEQUE** Payable to McMaster University
- AMEX**     **MASTERCARD**     **VISA**

SIGNATURE: \_\_\_\_\_

DATE     /     /      
MM / DD / YYYY

<b>OFFICE USE ONLY</b>	
Ref# _____	Initials: _____
Date: _____	

**Important:** Do not use email to submit your application if it includes your credit card information. You can use mail or fax - see top of page for details.

CREDIT CARD NUMBER: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_