

## OFF-CAMPUS MEAL PLAN APPLICATION

PLEASE PRINT

MAC ID \_\_\_\_\_

STUDENT ID# \_\_\_\_\_

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

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

**Please select one of the following:**

**RETAIL OPERATIONS** (minimum \$100.00) \$ \_\_\_\_\_

**TERM PLAN** (*minimum four weeks @ \$65.00 per week*)

Total # of weeks purchased \_\_\_\_\_ @ \$65.00 per week \$ \_\_\_\_\_

Please select a **Start date** for your Term Plan: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
mm / dd / yyyy

If Start Date is not selected, by default Start Date of Term Plan is the first day of classes in September.

**Expiry date** is determined by the number of purchased weeks \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
mm / dd / yyyy

*I understand the details of the meal plan I have selected.*

\_\_\_\_\_  
Student Signature (or Parent/Guardian if student is under 18) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
mm / dd / yyyy

**Note:** *The Term Plan is non-taxable on most food purchases. This plan is non-refundable and non-cumulative, and any unspent monies will be forfeited at the end of the expiry date (except upon complete withdrawal from the University, subject to a minimum charge of 4 weeks).*

**Payment made by:**

- CASH     AMEX     MASTERCARD     VISA
- DEBIT     CHEQUE\*     MONEY ORDER

**OFFICE USE ONLY**

Initials: \_\_\_\_\_

Ref# \_\_\_\_\_ Date: \_\_\_\_\_

*\*Please make cheque payable to "McMaster University". NSF charge of \$50.00 will apply to any returned cheque (subject to change without notice).*

Cardholder's Name \_\_\_\_\_ Signature \_\_\_\_\_

**Note: Do not use e-mail to submit your application if it includes your credit card information. You can use mail or fax.**

Credit Card Number \_\_\_\_\_ Expiry Date \_\_\_\_\_