



KETTERING UNIVERSITY DINING SERVICES MEAL PLAN CONTRACT 2011 – 2012 *

I, _____, have chosen the following dining program for
(Please print name)
 section _____ to commence on _____ and end on _____.

I have chosen:

Please note: Plan A is valid for the current term only – no carryover.

PLAN A : FULL BOARD MEAL PLAN (Mandatory for all new students,
Optional for other Upperclassmen)

\$ 1,255.00 per academic term

Includes: 15 Meals (Breakfast, Lunch, & Dinner) - Monday thru Friday

4 Meals (Brunch & Dinner) - Saturday & Sunday

\$50 bonus to be used in the SUNSET Retail Dining Lounge & Library Café

Á OR

Includes: 14 Meals (Breakfast, Lunch, & Dinner) - Monday thru Friday

\$125 bonus to be used in the SUNSET Retail Dining Lounge & Library Café

Meals will not be provided during the following food service close-down periods:

- September 2-5, 2011
- November 24-27, 2011
- January 14-16 and March 2-4, 2012
- April 8 and May 25-28, 2012

Students requiring food service during this time must contact Sodexo prior to this period to make arrangements for meals which can be made for them to pick up in advance of the close-down periods at an additional cost (this can be deducted from the above SUNSET Retail Dining Lounge \$50 or \$125 bonus).

Please note: Plans B & C are non-refundable. Meals purchased will be valid for 1 year from date of purchase. Meals not used within a 1 year period will be forfeited.

PLAN B : 25 MEAL PLAN (Upperclassmen)

Includes 25 Breakfasts at a cost of	\$ 104.00	Qty _____
OR 25 Lunches at a cost of	\$ 154.00	Qty _____
OR 25 Dinners at a cost of	\$ 200.00	Qty _____
OR Combine 25 Lunches & 25 Dinners at a cost of	\$ 354.00	Qty _____

PLAN C : 50 MEAL PLAN (Upperclassmen)

Includes 50 Breakfasts at a cost of	\$ 208.00	Qty _____
OR 50 Lunches at a cost of	\$ 308.00	Qty _____
OR Combine 35 Breakfasts, 35 Lunches & 35 Dinners at a cost of	\$ 640.85	Qty _____

Please bill the Kettering University Student Accounts office for my designated meal plan.
 I further authorize the Student Accounts office to bill my student account for the entire cost of my dining service meal plan. MAKE CHECK PAYABLE TO KETTERING UNIVERSITY

The amount to be billed to my student account is: _____

Signature of Student Accounts office: _____

Student ID#: _____

(Student Signature)

(Date)

* Initial contract choice is for 2011– 2012