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**Meal Plan Selection Form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name: |  |  | ID#: |  |

 **Semester**

|  |
| --- |
| * Fall \_\_\_\_\_
 |
| * Spring \_\_\_\_\_
* Summer \_\_\_\_\_
 |
|  |

**Meal Plan Selection**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Type** | **# of Meals** | **Cost** | **Roadrunner Cash** |
| 🞎 | Block 20 | 20 Meals | $170.00  | $25 |
| 🞎 | Block 35 | 35 Meals | $280.00  | $35 |
| 🞎 | Block 55 | 55 Meals | $420.00  | $50 |
|  |  |  |  |  |

**Commuter Meal Plans are valid during all meal periods Monday- Sunday.**

Roadrunner Café Hours Monday-Friday
Breakfast: 7:30 am - 10:00 am
Lunch: 10:30 am - 3:30 pm
Dinner: 4:30 pm – 7:30 pm

 Roadrunner Café Hours Saturday- Sunday
Brunch: 11:00 am – 1:00 pm

Dinner: 4:30pm – 6:30 pm

**Payment Method**

|  |
| --- |
| * Cash
 |
| * Check
 |
| * Roadrunner Cash
 |
| * Third Party Contract
 |
| * Financial Aid/ Student Account ***(review authorization below)***
 |
|  |

**Financial Aid/ Student Account Authorization**

Federal regulations require an institution to obtain written authorization to apply Title IV financial aid to “non-allowable charges” which includes meal plans.

Please select one statement and sign as indicated below.

* I authorize Dalton State to add this charge to my account and if available apply my Title IV financial aid funds to cover my meal plan selection.
* I do not authorize Dalton State to add this charge to my account

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature |  | Date |

**Acknowledgment**

By my signature below, I acknowledge I have read and understand the meal plan terms and conditions.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature |  | Date |

**For Campus Services Use Only:**Posted in Blackboard \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Roadrunner Cash Added\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |