****

**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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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