

2009 SUMMER SESSION MEAL PLAN & FLEX POINT APPLICATION

ndID number (9-digit '90' student number, if available, also found on ID card): _____

LAST NAME, First Name, clearly printed: _____

Telephone and/or email where we may reach you: _____ Date: _____

'Week-to-Week' Meal Plans: You may order anywhere from one (1) to eleven (11) weeks of weekly meal plans. Of course, the first and last weeks of summer are not a 7-day week, so you may want a smaller block of meals for those weeks, just make a note of your special requests. Weekly prepaid meal plans (available from Tuesday, 5/26/09 through 8/6/09 in the South Dining Hall *only*) will be programmed remotely to and accessed only through your Student ID card. Your purchased weekly plan will always **begin with Saturday breakfast and end after a Friday dinner**. New meal plan applications received prior to noon on Fridays are accessible the upcoming Saturday breakfast. Changes to previously received meal plans need to be submitted before noon on Thursday to be effective for the upcoming Saturday breakfast. Notify Card Services if you need to cancel your meal plan for a refund for each unused week.

'All Summer Long' Flex Points: Flex Points may be programmed remotely to your ID card for use during the *entire* summer session (not week-to-week like a meal plan, and for use with or without a meal plan). One Flex Point is equivalent to one dollar, and are for use at most campus restaurants and eateries across campus. Flex Points may supplement dining hall board meals. Once purchased, Flex Points are nonrefundable and unused Flex Points expire after August 7, 2009. Visit food.nd.edu for a complete listing of Food Services locations and other helpful information.

Use our helpful CALENDAR, at right

*Saturday = Week's START Date **Friday = Week's END Date

Blue Plan, \$147.00 per week
Up to 21 meals per week (3 meals/day)

Gold Plan, 126.00 per week
Up to 14 meals per week

Perfect 10, \$101.00 per week
Up to 10 meals per week

Perfect 5, \$53.00 per week
Up to 5 meals per week

_____ # of Flex Blocks desired, if any
(1=\$25, 2=\$50, 3=\$75, 4=\$100, etc.)

| S | M | T | W | T | F | S | Week |
|---|---|-----------------|----|----|----|------|--------|
| | | Lunch on 5/26** | 27 | 28 | 29 | 30 * | Week 1 |

| S | M | T | W | T | F | S | Week |
|------|----|----|----|----|------|-----|--------|
| 5/31 | 1 | 2 | 3 | 4 | 5** | 6* | Week 2 |
| 7 | 8 | 9 | 10 | 11 | 12** | 13* | Week 3 |
| 14 | 15 | 16 | 17 | 18 | 19** | 20* | Week 4 |
| 21 | 22 | 23 | 24 | 25 | 26** | 27* | Week 5 |
| 28 | 29 | 30 | | | | | |

| S | M | T | W | T | F | S | Week |
|-----|-----|-----|-----|-------|----------|-----|---------|
| | | | 1 | 2 | 3** | 4* | Week 6 |
| 5 | 6 | 7 | 8 | 9 | 10** | 11* | Week 7 |
| 12 | 13 | 14 | 15 | 16 | 17** | 18* | Week 8 |
| 19 | 20 | 21 | 22 | 23 | 24** | 25* | Week 9 |
| 26 | 27 | 28 | 29 | 30 | 7/31** | 8/1 | Week 10 |
| 8/2 | 8/3 | 8/4 | 8/5 | 8/6** | No meals | | Week 11 |

NOTE: No dinner meal on June 5, 2009
LAST MEAL is on 8/6; NO MORE MEALS after 8/6/09

| Meal Plan | 1 wk. | 2 wks. | 3 wks. | 4 wks. | 5 wks. | 6 wks. | 7 wks. | 8 wks. | 9 wks. | 10 wks. | 11 wks. |
|-------------|-------|--------|--------|--------|--------|--------|---------|---------|---------|---------|---------|
| Blue | \$147 | \$294 | \$441 | \$588 | \$735 | \$882 | \$1,029 | \$1,176 | \$1,323 | \$1,470 | \$1,617 |
| Gold | \$126 | \$252 | \$378 | \$504 | \$630 | \$756 | \$882 | \$1,008 | \$1,134 | \$1,260 | \$1,386 |
| 10 | \$101 | \$202 | \$303 | \$404 | \$505 | \$606 | \$707 | \$808 | \$909 | \$1,010 | \$1,111 |
| 5 | \$53 | \$106 | \$159 | \$212 | \$265 | \$318 | \$371 | \$424 | \$477 | \$530 | \$583 |

Date Range and Total Weeks for Meal Plan, and/or Flex Point order:

Beginning Sat. date: _____ until Ending Fri. date: _____ TOTAL # of Weeks: _____

with _____ (1, 2, 4, etc.) of \$25.00 Flex Point Block(s): \$ _____ **TOTAL DUE**

\$

2 choices: Either **CHECK** enclosed ("UND") _____, or **CHARGE** my preexisting ND Student Account weekly _____
Mark here _____ if you require *one lump sum billing* rather than the default weekly billing.

Department FOAPAL (if applicable): _____

Email to **Juliane Lusk** at julianelusk@nd.edu, or Mail to: Card Services, 1 SDH, Univ. of Notre Dame, Notre Dame, IN 46556