

FIND YOUR FIT 2023/24



Student Name: _____

Home Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: () _____ School Phone: () _____

Student Email Address: _____ Student Number: _____

Student Bar Code Number: _____ House Name: _____

Please select your desired meal plan:

ALL ACCESS PLAN	SEMESTER ALL ACCESS PLAN	100 MEALS PLAN	CONVENIENCE PLAN	ON-THE-GO PLAN
TAX FREE UNLIMITED MEALS PLUS \$800 DECLINING BALANCE DOLLARS	TAX FREE UNLIMITED MEALS PLUS \$400 DECLINING BALANCE DOLLARS	TAX FREE 100 MEALS VALID FOR FULL YEAR	TAX FREE 75 MEALS PLUS \$100 DECLINING BALANCE DOLLARS VALID FOR FULL YEAR	TAX FREE \$750 IN DECLINING BALANCE DOLLARS VALID FOR FULL YEAR
\$5,644	\$2,822	\$1,300	\$1,075	\$750
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Payment Options: VISA MASTERCARD CHEQUE

Cardholder Name: _____

Card Number: _____

Expiration Date: _____

Signature: _____

Completed Forms can be dropped off to the Aramark office located in the University Centre UC1027. For any questions, email buragina-nicke@aramark.ca

