



Commuter Meal Plan Request Form

DATE: _____

STUDENT NAME: _____ STUDENT ID#: _____

I wish to enroll in the Rivier University commuter meal plan:

Price: \$125.00 for 25 Dining Hall visits

- I understand that this plan is non-refundable and non-transferable
- Unused meals can be carried from one academic year to the next as long as the student is registered for courses

I wish to purchase _____ commuter meal plan(s) in the amount of \$_____.

STUDENT SIGNATURE: _____

.....
Please return this form with your payment to the Student Financial Services Office.

- PAYMENT TYPE: Cash - Drop form and payment off in Adrienne Hall, First Floor
 Check – Mail your form and payment to:
 Attn: SFS Office, Rivier University, 420 S. Main St., Nashua, NH 03060
 Credit Card – Complete form below:

Please note: There will be a 2.75% convenience fee added by our credit card processor at the time of payment for all credit card payments. (\$125 x 2.75% = \$3.43)			
<input type="checkbox"/> MC	<input type="checkbox"/> VS	<input type="checkbox"/> DISC	<input type="checkbox"/> AMEX
CARD#: _____		EXP. DATE: __ __ / __ __	
NAME ON CREDIT CARD: _____		PHONE: _____	

For Office Use Only
Payment Received: _____
Charged applied to student account: _____
Meal plan applied to student ID card: _____