

Name: _____

Class Year: _____ Student ID #: _____

Phone: _____ E-Mail: _____

Permanent Address: _____

City/State/Zip: _____

Commuter Meal Plan Sign Up Form

SELECT YOUR DINING PLAN

COMMUTER MEAL PLANS	With DB	Without DB
<input type="checkbox"/> 75 Meals Per Semester \$50 DB	\$425	<input type="checkbox"/> \$382.50
<input type="checkbox"/> 50 Meals Per Semester \$100 DB	\$350	<input type="checkbox"/> \$260.00
<input type="checkbox"/> 25 Meals Per Semester \$150 DB	\$275	<input type="checkbox"/> \$132.50
<input type="checkbox"/> \$360 Declining Balance Dollars	\$300	

PAYMENT OPTIONS

DECLINING BALANCE

- Check or Money Order made payable to Johnson State college
- Visa MasterCard

COMMUTER MEAL PLANS

- Check or Money Order made payable to Castleton State College
- Visa MasterCard

Name: _____

E-Mail: _____

Relationship: Self Parent Guardian Other

Card #: _____

Expiration Date: _____

PLEASE SEND COMPLETED ENROLLMENT CARD TO:
ARAMARK @ Castleton State College

185 College Dr

Castleton, VT 05735

Web Site: www.castleton.campusdish.com

** (Must be purchased w/in 1st two weeks of classes)

PLEASE NOTE: Unused Declining Balance Dollars transfer from fall to spring semester. At the end of spring semester, unused dollars are non-refundable and cannot be transferred to the new academic year.