



NYU Employee Meal Plan Application

Please complete and return this form August 1, 2009 - September 18, 2009 to enroll in the Fall 2009 Employee Meal Plan. Choose between two meal plans, 20 meals and 50 Dining Dollars or 50 meals and 25 Dining Dollars.

Any remaining fall dining dollars will roll over in the spring semester if you maintain a meal plan.

Please visit www.nyudining.com for dining locations, hours, menus and nutritional information.

Name: _____

NYU ID#: N1 _____

Office Address: _____

Office Phone: _____

Department: _____

Email: _____

Please enroll me in the following meal plan:

- 20 meals and 50 Dining Dollars for \$175.
- 50 meals and 25 Dining Dollars for \$300.

Employment Classification: Faculty/Research (102,103) Administration (100) Staff (104,106,107)

What is your pay cycle?

- Weekly (*cost of meal plan will be deducted over 3 pay periods*)
- Biweekly (*cost of meal plan will be deducted over 2 pay periods*)
- Monthly (*cost of meal plan will be a one time deduction*)

I hereby authorize and direct New York University to make a payroll deductions in the amount and allotments specified above to enroll me in a meal plan membership.

Signature: _____ Checking this box waives a signature by enrollee

Please fax the signed form to 212-995-4660 Attention: Owen Moore, Director of Dining Services