



Benefitted Employee Meal Plan
Terms and Conditions
Payroll Deduction Authorization

I, _____, understand that the Employee Meal Plan is a 12 month commitment through payroll deduction of \$86.25 per month. If I voluntarily terminate the payroll deduction before the 12 month consecutive period is completed. I can NOT re-enroll for a consecutive 12 month period from my termination date.

I, _____, would like to sign up for the Employee Meal Plan. I authorize a payroll deduction of \$86.25 per month for the purchase of an Employee Meal Plan with _____ (month/year) payroll deduction. Meals will be active on the first day of the following month.

Signature: _____ Date _____ A# _____

USU Eastern Dining Services
451 East 400 North, PMB 174
Price, Utah 84501
(435) 613-5767
becky.archibald@usu.edu