



At the University of Illinois

NON-RESIDENT BOARD CONTRACT
SEMESTER-ONLY

STUDENT INFORMATION:

1. LAST NAME (PRINT) 2. FIRST NAME M.I.
3. HOME STREET ADDRESS 4. CITY 5. STATE 6. ZIP CODE
7. CELL TELEPHONE NUMBER 8. EMAIL ADDRESS

The Bromley Hall 3rd Street Commons Dining Hall serves three meals per day Monday through Friday, and brunch and dinner on Saturday and Sunday. Non-Resident Board Plans begin on the first day of classes and end on the last day of final examinations each semester.

- All Meals Served Plan - allows one entry to the Dining Hall at each meal offered, all day.
Any Two Meals Per Day Plan - allows one entry to the Dining Hall at each meal offered, twice a day.

BOARD PLAN SELECTION (SEMESTER-ONLY):

(CHECK ONLY ONE)
SPRING 2019 [ ] FALL 2019 [ ] SPRING 2020 [ ]

(CHECK ONLY ONE)
[ ] All Meals Served \$ 1,410 (Tax Included)
[ ] Any Two Meals Per Day \$ 1,250 (Tax Included)

I hereby acknowledge that I have received, read, understand, and agree to the terms and conditions contained in the current "Bromley Hall Room and Board Agreement".

I hereby authorize a signature submitted by me by facsimile or other electronic transmission to be as valid and binding as my original signature.

Student's Signature: Date:

GUARANTY

FOR VALUE RECEIVED, and in consideration for, and as inducement to, the AGENT making the foregoing Agreement, the undersigned guarantees to the AGENT full payment and performance by the STUDENT of his or her obligations under the Agreement without requiring notice of non-payment, non-performance, or proof of notice or demand, all of which the undersigned expressly waives, and the undersigned expressly consents to any modifications of the Agreement, including but not limited to extensions of the term of the Agreement and adjustments to the room and board rates contained in the Agreement, and any extensions of time or indulgences granted by the AGENT to the STUDENT.

Signature of Parent or Legal Guardian: GUARANTOR

CREDIT CARD INFORMATION:

Please Charge My: [ ] VISA [ ] MasterCard

CARD NUMBER: EXPIRATION DATE: SECURITY CODE:

CARDHOLDER'S SIGNATURE

CARDHOLDER'S ADDRESS (IF DIFFERENT FROM ADDRESS ABOVE) CITY STATE ZIP CODE

Non-Resident Board Contracts can be submitted to the Business Office either in person, via mail or email. Please contact us if you have any questions or would like to inquire about Group rates.