



DECLINING BALANCE PROGRAM AGREEMENT
(RETURN TO THE UMASS PASS OFFICE OR THE HOUSING OFFICE)

NAME: _____ STUDENT ID# _____
EMAIL: _____@umassd.edu

Please enroll me in the Declining Balance Program for the 2009 – 2010 academic year:

- \$200.00 Declining Balance Program
- \$300.00 Declining Balance Program
- \$400.00 Declining Balance Program
- \$500.00 Declining Balance Program

The Declining Balance Program is a convenient alternative to carrying cash. Your Declining Balance Program funds are held in a prepaid account that acts like a debit card. This allows you the opportunity to purchase meals and snacks on campus at any Dining Services location (Vending machines are not included.) Declining Balance Program funds are available to you for your entire academic career. Declining Balance Program funds cannot be refunded with cash at any time. Any unused balances will be refunded upon graduation, withdrawal, or transfer from the University.

You may purchase additional Declining Balance Program funds at the UMass Pass Office at any time. Payment for additional Declining Balance Funds is due upon the request for funds. Cash, Check, or Credit Card is required.

I agree to pay the University the amount of the Declining Balance Program I have selected as statements are submitted. I acknowledge that my signature on this contract constitutes a binding contract for the entire 2009 – 2010 ACADEMIC YEAR, and I agree to pay the contract rates specified and abide by and acknowledge receipt of a copy of the terms and conditions.

STUDENT'S SIGNATURE _____ DATE: _____

FOR OFFICE USE ONLY

ODYSSEY DATE ENTERED _____ INITIAL _____ RMS DATE ENTERED _____ INITIAL _____