



NAISMITH HALL – Serving Students AT THE UNIVERSITY OF KANSAS
For the Academic Year 2015-2016
ROOM AND BOARD Addendum – 10 installment Contract

PART ONE. STUDENT INFORMATION [Please refer to the "Addendum Procedures" for instructions on how to complete this Addendum.]

1. (Print) Student's Last Name _____ 2. Student's First Name _____ 2a. M.I. _____ 3. Student's Social Security # _____
 4. Home Street Address _____ 5. City _____ 6. State _____ 7. Zip Code _____
 (____) _____ - _____
 8. Student's Cellular Telephone Number _____ 9. Gender (circle): M F _____ 10. Home e-mail: _____

PART TWO. PARENT INFORMATION

11. Parent or Guardian's Last Name _____ 12. Parent or Guardian's First Name _____ (____) _____ - _____
 13. Home Telephone Number _____
 (____) _____ - _____
 14. Parent's Work Telephone Number (for emergency purposes) _____ 15. Parent's Social Security Number (or Guarantor's) _____

I hereby acknowledge that I have received, read, understand, and agree to the terms and conditions contained in the Academic Year 2015-2016 "Naismith Hall Room and Board Agreement" and "Rules & Regulations for Naismith Hall Residents." I hereby authorize a signature submitted by me by facsimile or other electronic transmission to be as valid and binding as my original signature. Along with this Application, I am submitting a Fifty Dollar (\$50) payment; The (\$50) is a non-refundable application fee required by the Agreement for the following accommodations: **only check one room type and one meal type**

<u>ROOM</u>	<u>BOARD</u>
Choose only one room type: All rooms have semi private shared bathrooms and a Sink in resident room.	Choose only one board type: All Meals a resident can enter the dining room one time for each meal. The any two meals per day allows a resident to enter the dining room twice a day (i.e. breakfast & lunch, lunch & dinner, or breakfast & dinner) every day the food service is in operation.

Room Types		Meal Plans	
	Total Contract	10 Installments	
<input type="checkbox"/> Regular Single	\$ 8,270.00	\$827.00	<input type="checkbox"/> All Meals
<input type="checkbox"/> Premium Single	\$ 8,790.00	\$879.00	<input type="checkbox"/> Any Two Meals Per Day
<input type="checkbox"/> Regular Double	\$ 4,870.00	\$487.00	
<input type="checkbox"/> Premium Double	\$ 5,130.00	\$513.00	

Additional Options	Contract Price	Installment Plan (10 equal payments)
16. Mini-Fridge/Microwave	<input type="checkbox"/> \$120.00	<input type="checkbox"/> \$12.00
17. Parking Permit	<input type="checkbox"/> \$350.00	<input type="checkbox"/> \$35.00

***includes applicable sales taxes**

I agree to pay the total amount due for my Room and Board accommodations and selected additional options in 10 equal installments, starting July 15, 2015, and Continuing through April 15, 2016

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. I HAVE READ AND UNDERSTAND THE REFUND AND LIABILITY PROVISIONS CONTAINED IN THE 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.

Signature of Parent or Legal Guardian: _____, GUARANTOR

PART THREE. RESIDENTIAL DATA (As of the Fall Semester of 2016)

20. Circle year in college: FR SO JR SR GR _____ 21. Circle previous Housing: NEW TO CAMPUS On Campus Returning Resident Transfer
 22. High School Name _____ 22a. Estimated High School Graduating Class Size (____)
 23. Birth Date: ____/____/____ 24. Computer Platform: (Circle) WINDOWS or MAC or NONE
 25. KU-Mail address: _____@KU.edu
 26. Roommate 1 requested: _____
 27a. Suitemate 1 requested: _____ 27b. Suitemate 2 requested: _____
 28. Alternate Room Type: _____ 29. Curriculum/Major: _____
 30. Study Habits: __Morning __Afternoon __Evening __Late Night 31. Hobbies/Activities: __Sports __Fitness __Current Events __Music (type-____)
 32. I enjoy going out regularly and socializing with fellow residents and school mates YES NO (please circle one)

PART FOUR. CREDIT CARD INFORMATION / Please Charge My: VISA MasterCard for Dollar (\$50.00) payment.

Card Number: _____ Expiration Date: ____/____/____ Security Code: _____
 (Three digits on back of credit card)

Cardholder's Signature _____

Cardholder's Address (if different from address in Part I above) _____ City _____ State _____ Zip Code _____