

# Mason Dining Sick Tray Authorization Form

Please Print:

Student Name: \_\_\_\_\_ Date to be Used\*: \_\_\_\_\_

G # \_\_\_\_\_ Charge Amount Limit: 1 meal

I authorize my meal plan account to be accessed by the **below signed carrier** so that he/she may pick up a meal for me in my absence. In addition, my ID card along with the signed authorization form must be presented to the checker/cashier or dining services administrator in order for the carrier to pick up my meal. (Carrier must present proof of identity (Identification))

\_\_\_\_\_  
Meal Plan Holder Signature

\_\_\_\_\_  
Carrier Signature

Meal Plan Holder phone # \_\_\_\_\_

*\*To safeguard your meal plan account, this form will be accepted only for the date listed above*

## Circle 1

### Meal 1

1 Jell-O cup  
1 Ginger Ale  
1 Powerade  
4 packs of saltine crackers

### Meal 2

1 Pudding or Apple Sauce  
1 Banana  
1 Powerade  
4 packs of saltine crackers

## Circle 1

Soup of the day [Can be viewed on the Bite App or Mason Dining Site]  
Deli Sandwich or PB&J Sandwich

## Circle 1

Oatmeal  
Original Cheerios or Original Chex Cereal

*\*\*May take up to 20 minutes to complete order once carrier arrives at the dining hall with this form.*

**Cashier to ring sale in register using above Student's ID.**

**Cashier to staple receipt to form and return to carrier.**

**Carrier to provide form with receipt to Salad Bar employee.**

**Salad Bar employee to provide carrier requested meal and retain form.**

Date/Meal Period Used: \_\_\_\_\_

Amount Charged: \_\_\_\_\_

Location: \_\_\_\_\_

Cashier Signature \_\_\_\_\_