

# SENIOR DINE ORDER FORM **NEW OPPORTUNITIES, INC.** *Building Relationships to End Poverty*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Senior Dine Card #: 6010-9600-100

*(The last 6 digits as they appear on your SeniorDine Card)*

THE ACTUAL VALUE OF THE MEAL IS IN EXCESS OF \$10.00. SELECT THE DONATION AMOUNT THAT BEST FITS YOUR BUDGET.  
PLEASE GIVE AS MUCH AS YOU CAN AFFORD. DONATION DOES NOT INCLUDE TIP FOR SERVER!!!

Household Monthly Income		Suggested Donation	# of Meals	Total Donation
<i>[Single Person]</i>	<i>[Two Person]</i>	<i>[Per Meal]</i>	<i>[No more than 20]</i>	<i>[Donation x # of Meals]</i>
\$0-\$1,354	\$0-\$1,821	\$3.50		
\$1,355 - \$2,032	\$1,822 - \$2,731	\$4.00		
\$2,033-\$2,709	\$2,732-\$3,642	\$4.50		
\$2,710-\$3,165+	\$3,643-\$4,250+	\$5.00		
		<i>Other</i>		
<b>Credit Card Fee</b>				<b>\$1.00</b>
<b>Total Amount Charged</b>				

- Cash is only accepted in person. DO NOT send cash in the mail.
- Checks & Money Orders should be made payable to "Senior Nutrition Services".
- \$1.00 Credit Card Fee will be added to all credit card transactions only.
- **MasterCard/VISA Only Accepted:**  
 Name As It Appears on Card: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Credit Card #: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_ CDC Code: \_\_\_\_\_  
 (The three digit number located on the back of your credit card.)
- Return completed form and payment to: **New Opportunities, Inc. – SNS - 232 North Elm Street - Waterbury, CT 06702.** [Office is located on the 3rd Floor- Main Entrance]
- It will take at least **10 days** from the day you mail your order for your SD Card to reflect your order/payment.

**For Office Use Only:**

Payment Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  Cash  Credit Card  Check/Money Order [# \_\_\_\_\_]