



IFR Wellness Account #901105

## Stony Brook University Faculty/Staff

### Wellness Center Membership Form

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

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Campus Address: \_\_\_\_\_ Campus Z: \_\_\_\_\_

Membership Type: Please place an (X) in the membership box that you are purchasing:

\$165.00/Year Membership (Valid for one year from the date of purchase)

\$125.00/Academic Year 2009-10 (Valid August 31, 2009 - May 20, 2010)

\$70.00/Semester

FALL: August 31, 2009 - December 23, 2009

SPRING: January 25, 2010 - May 20, 2010

\$25.00/Month (Date of Purchase)

\$35.00/ Winter Special (Valid December 1, 2009- January 31, 2010)

Payment must be made to the **Bursar Office**, located in the Administration Building, Room 261. All employees wishing to utilize the Wellness Center must present their Stony Brook Campus ID Card.