



GOPHER GOLD DEPOSIT FORM

Please turn this form in at the U Card Office.

U Card Holder's Information

Last Name:	First Name:	ID Number or Visitor Card #:
------------	-------------	------------------------------

Total Deposit Amount	\$	<input type="checkbox"/> Cash
		<input type="checkbox"/> Credit or Debit Card
		<input type="checkbox"/> Gopher GOLD Promo Card
		<input type="checkbox"/> Check

Please sign below to indicate you have received and accepted the Gopher GOLD Account Terms and Conditions.

Signature:	Date:

★ Please make sure your form is signed and dated before submitting or your deposit cannot be processed.

★ If depositing with a check, please make checks payable to the University of Minnesota.

FOR OFFICE USE ONLY

Received By:	Date:	Comments:



GOPHER GOLD DEPOSIT FORM

Please turn this form in at the U Card Office.

U Card Holder's Information

Last Name:	First Name:	ID Number or Visitor Card #:
------------	-------------	------------------------------

Total Deposit Amount	\$	<input type="checkbox"/> Cash
		<input type="checkbox"/> Credit or Debit Card
		<input type="checkbox"/> Gopher GOLD Promo Card
		<input type="checkbox"/> Check

Please sign below to indicate you have received and accepted the Gopher GOLD Account Terms and Conditions.

Signature:	Date:

★ Please make sure your form is signed and dated before submitting or your deposit cannot be processed.

★ If depositing with a check, please make checks payable to the University of Minnesota.

FOR OFFICE USE ONLY

Received By:	Date:	Comments:

