NCFH Laundry room membership form

If you would like to use the laundry room located in your building, please fill out this form, sign it and submit to the Housing Office, by email to Housing@aucegypt.edu.

When you subscribe for the service, you will be provided with a key to the laundry room in your building. (If you are leaving AUC or if you leave the service, you have to return the key).

Name:

________________________________________________________________________

AUC ID:

________________________________________________________________________

Cellular Phone
Number:______________________________________________________________

Faculty Housing:

____________________________________________________________________

Apartment Number:

______________________________________________________________

Home Telephone:

______________________________________________________________

Payment method
Choose one of the following methods:

Please note that the minimum subscription period is one month.

1. Payroll deduction

I approve the deduction of the marked monthly subscription fees mentioned below from my paycheck and this approval for deduction is limited to the marked amount.

☐ LE. 40 for the one-bedroom apartment

☐ LE. 60 for the two-bedroom apartment

☐ LE. 80 for the three-bedroom apartment

Signature:________________________ Date:________________________
2. **Cash payment in the CIB**

The Housing Office will send you a Collection advice form with the amount marked below to be used for the payment, you will receive the key as soon as we receive the CIB receipt.

- [ ] LE. 240 Six months subscription for the one-bedroom apartment
- [ ] LE. 480 One year subscription for the one-bedroom apartment
- [ ] LE. 360 Six months subscription for the two-bedroom apartment
- [ ] LE. 720 One year subscription for the two-bedroom apartment
- [ ] LE. 480 Six months subscription for the three-bedroom apartment
- [ ] LE. 960 One year subscription for the three-bedroom apartment

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**Signature:** 

________________________________________

**Date:** 

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