



**WELLNESS CENTER**

Lake Shore Campus • Granada Center 310  
6439 N. Sheridan Road • Chicago, IL 60626  
P 773.508.2530 • F 773.508.2505 • W LUC.edu/wellness

Water Tower Campus • Terry Student Center 250  
26 E. Pearson St. • Chicago, IL 60611  
P 312.915.6360 • F 312.915.6362

## Wellness Center Optional Enrollment Form

**Name:**

**Student ID Number:**

**School of enrollment:**

**On what campus do you attend classes:**

**Loyola email address:**

**Enrollment Term & Fee:**

I understand that my student account will be billed the Optional Wellness Fee per fee schedule. Agree:

**Signature:**

**Date:**

**Please fill out form and email to [wellnesscenter@luc.edu](mailto:wellnesscenter@luc.edu)**