Registration Form: Winter 2016

□ Check this box if there are changes in your membership information since your last submission.

Membership Information:

Please print and fill in all spaces completely.

Dr. Mr. Mrs. Ms. (CIRCLE		,		/				
Address	LAST NAM	PREFERRED FIRST NAME	MI					
Address	STREET	, CITY	,,,,,,,,,	ZIPCODE				
Phone								
Emergency Contact		Relationship	Phone					
Preferred Member Portal L	Jser Name	Licer	ise Plate #					
(for new members only)	6 OR MORE CHARACTER	RS						
My former career was in			Check this box if you DO NOT want					
			to appear in the dire	ctory.				
New member? How did ye	ou hear about OLLI?		Check here if you DO NOT want to receive paper catalog mailings.					
OILLic a Valuateor Bu	Ros			5				
OLLI is a Volunteer Ru			Home Campus/					
□ Not yet. Contact me la			Where to Pick Up Nametag:					
□ I am interested in volum	-							
Audiovisual	Hospitality	Outreach	Fairfax (Tallwood)					
Communications	1 0	Programs	Reston					
Development	Member Services	Teaching	🖵 Loudoun					
Finance	Mentoring	Anything						
Dues and Donations In	nformation:							
Please check the appropri	ate box below:							
Enclosed is my payment for	or:							
Annual Membership	(\$375) One year of unlir	\$						
(Offered to new, rene								
Introductory Member	\$							
(Offered ONLY to new								
Contribution to Friend	\$							
Check if you want to	·							
□ First Come/First Serve	-		Ś					
(Pay Each Class with a			T					
	·····		Total \$					

By signing this form, I agree to all OLLI policies and procedures, and waive OLLI liability for any bus trip on which I participate: _____

Payment Information:						
Enclosed is a CHECK payable to OLLI (<u>PREFERRED</u>)						
Please charge my UISA MasterCard Discover:						
Name as it appears on the credit card						
Expiration Date:	/					

Office Use Only Date Received						
Date Processed						
Dues ChkCC						
Spec Chk	CC					
Spec Chk	CC					
OLLIChk	CC					

Registration Instructions for Courses and Special Events

- Prioritize your selections separately for courses and special events!
- If you are willing to be a class liaison, put a check in the liaison column.
- For prioritized courses/events with fees, payment is required only after you are notified you are on the class list.
- For first come, first served courses/events with fees, you must provide payment NOW by attaching a separate check or credit card information. Enter payment amount on the other side of this form. See p. 29 for payment policy.

COURSES

	Number	Liais	on	Course Title	9	٦	Number	Liaisc	on	Course	Title	
1st priority						7th priority						
2nd priority						8th priority						
3rd priority						9th priority						
4th priority						10th priority						
5th priority						11th priority						
6th priority						12th priority						

SPECIAL EVENTS

	Number	Liaiso	n	Course Title	2	1	Number	Liaiso	n	Course	e Title	
1st priority						7th priority						
2nd priority						8th priority						
3rd priority						9th priority						
4th priority						10th priority						
5th priority						11th priority						
6th priority						12th priority						

CLUBS/ONGONG ACTIVITIES

List the clubs for which you would like to register.

Club Name					

Mail Completed Registration Form to the Tallwood Office, 4210 Roberts Road, Fairfax, VA 22032.