

Osher Lifelong Learning Institute  
**Registration Form**

Spring 2010: March 1 - May 7, 2010

**Registration Assignment/Lottery for Oversubscribed Classes: February 10, 2010**

ph: 202.895.4860

fax: 202.895.4865

email: OLLI@american.edu

website: www.OLLI-DC.org

Name

*Last*

*First*

*Middle*

Address

*Number and Street*

*Apartment*

*City*

*State*

*Zip Code*

Phone

Email

Emergency Contact

*Name and Relationship*

*Phone*

**REGISTRATION CHOICES**

*Select as many as three (you may call or email to register for a fourth class after March 7)*

Course #                      Title/Day                      SGR

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_  
\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_  
\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_

If my first choices (listed above) are not available, these are my alternate choices:

\_\_\_\_\_                      \_\_\_\_\_  
\_\_\_\_\_                      \_\_\_\_\_  
\_\_\_\_\_                      \_\_\_\_\_

Please call the office (202.895.4860) to register for 906 Study Group Leadership \_\_\_\_\_

**PAYMENT & DONATIONS**

Already Paid -- Full year (\$400)\* \_\_\_\_\_

Spring Semester (\$225) \_\_\_\_\_

(\*Full year payable only in the fall)

**Donation to the OLLI Future Fund** \_\_\_\_\_

Total \$ \_\_\_\_\_

All donations are tax deductible  
Please make checks payable to *OLLI*.  
*Financial assistance is available.*  
*Contact the OLLI office for information.*  
Payment must accompany registration, or register online: [www.OLLI-DC.org](http://www.OLLI-DC.org).

**RELEASE FORM**

In order to assist in the purposes and programs of the Osher Lifelong Learning Institute of American University (OLLI), I hereby grant permission to use photographs or video of me in its marketing and other publications, printed or electronic, and waive all claims for damages or payment from OLLI, American University, their agents and employees in connection with such use.

*Name*

*Signature*

*Date*

\_\_\_\_\_

**VOLUNTEER**

- Study Group Rep. (SGR)** \_\_\_\_\_
- Office/Mailings \_\_\_\_\_
- Curriculum Committee \_\_\_\_\_
- Lecture Committee \_\_\_\_\_
- Newsletter \_\_\_\_\_
- Other \_\_\_\_\_

- (assists the SGL, circulates the roster, reads announcements)**
- (stuffs envelopes, etc., usually at the Capital Hall office)
- (recruits new SGLs)
- (identifies new lecturers)
- (writes articles, profiles)

\_\_\_\_\_

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Office Use Only: