

OSHER LIFELONG LEARNING INSTITUTE (OLLI) AT FIU

REGISTRATION FORM

Please Print

Name: Last _____ First _____ M/I _____

Address _____ City _____ State _____ Zip _____

Phone _____ Cell _____

Email _____ Vehicle License Plate # _____

Membership is required to participate in the Osher Lifelong Learning Institute

| Course Number | Title of Course(s) | Fee |
|--|---|-----------|
| MEMBERSHIP | Current Annual Member <input type="checkbox"/> YES (If not already a member, or need to renew, the Membership \$40.00 Annually needs to be paid to allow registration for any course registrations.) | \$ |
| | | \$ |
| | | |
| | | |
| TOTAL DUE FOR TUITION AND MEMBERSHIP | | \$ |
| Please consider adding a tax-deductible donation to my TOTAL (Optional: OLLI is a self-sustaining program. Our operations are not subsidized by any government entity. We depend on, and really appreciate, any contribution you can make to help support the program. Thank you for your consideration.) | | \$ |
| TOTAL | | \$ |

PAYMENT INFORMATION:

You can fax your registration to 305-919-5484 or register over the phone by calling us at 305-919-5910. Thank you. (Note: Cash or check is NOT accepted)

Name as appears on card (Please Print) _____

Visa MasterCard Discover American Express

Card Number _____

Expiration Date: ____/____
(mo / yy)

*Signature _____ Credit Card Zip Code _____

*Card member authorizes charging credit card for the amount stated and agrees to OLLI registration/refund policies.

**A portion of your donation supports Advancement activities at FIU.