

Osher Lifelong Learning Institute
At the University of Michigan

EVENT REGISTRATION FORM

Today's Date: _____

Name(s): _____

Full Street Address _____

City/State and 9 Digit Zip: _____

Phone: _____

E-Mail Address: _____

Lecture/Study Group or Mini-Course Name:	Fee
<i>SUB TOTAL (Add \$15 annual membership dues if not an Osher member; good Sept. 1, 2008– Aug. 31, 2009 - \$10 after January 1 – August 31.)</i>	<input type="checkbox"/> Check box if new member, please
TOTAL	

Make check payable to: "OLLI at UM"

To confirm a class or lecture, call: 734-998-9351

To find out more about classes and lectures: www.olliumich.org

Where did you find information about OLLI? _____

For office use only:

Date received: _____

Processed by: _____

Amount Paid: _____

Is this a Scholarship? yes

Form of Payment: Cash Check

Check number: _____ Date on check: _____