

Registration Form Fall 2008

When two people are registering, please complete a separate form and send a separate check for each person. If additional forms are needed, you may download them from our website, www.olliuva.org, or use photocopies.

| Course No. | Course Title | No. of Units | I Will Coordinate |
|---|--------------|--------------|-------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| Total Units (No more than 12 for Sessions A and B Combined) | | _____ | _____ |

In the event any of the courses selected above already are filled, please list second choice(s).

| | | | |
|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

I am registering for the courses above; enroll me as a Member for \$100. \$ _____
 I am not taking courses this semester; enroll me as an Associate Member for \$25. \$ _____
 Make check payable to UVa Fund / OLLI

Please Note: When your registration is complete, a copy of your form, with your courses noted, will be returned. If you cannot attend a course, please notify the OLLI office at 434-923-3600 before the course begins.

Name _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ E-mail (for office use only) _____

Is this a new address, phone or e-mail? Yes No

Emergency Information:

Contact Name _____ Relationship _____ Phone _____

Yes! We need your help. On the back of this Registration Form, please check the box for the area(s) in which you can help us. Thank you!

How did you learn about OLLI at UVa?

Friend/neighbor Newspaper Picked up OLLI catalog Other _____

Where did you get your OLLI catalog?

Am on mailing list Friend/neighbor Picked up at _____

Mail this Registration Form and your check to: OLLI at UVa, 1160 Pepsi Place, Suite 114B, Charlottesville, VA 22901

