OLLI (Osher Lifelong Learning Institute) – SPRINGFIELD
Semester Membership Form

Please indicate below which membership type you are registering for:

Today’s Date: ____________________________

Name(s): __________________________________

Address: __________________________________

City: _____________________________________

State: ___________ Zip: _____________

Telephone: ___________________________________

e-mail address: ________________________________

___New Member        ___Returning Member

How did you hear about us? ________________________

Are you a UVM alumna/alumnus? (Y/N) _____

Please indicate below with an “X” what you are paying for:

___ Current Semester Membership: $35 for 6 lectures; OR
___ Individual lecture(s) $8 each:

  Lecture Date ______________; Title ______________________________
  Lecture Date ______________; Title ______________________________
  Lecture Date ______________; Title ______________________________

Make checks payable to:

“The University of Vermont”

Mail check and completed registration form to:

UVM OLLI Registration Office
23 Mansfield Avenue
Burlington, VT 05401

________________________________________

FOR OFFICE USE ONLY:

Amount & Date Paid: ________________  Check #_________