

REGISTRATION FORM FOR WINTER AND SPRING 2010

(PLEASE USE ONE FORM PER PERSON)

Name(s) _____

Full street address _____
(Include "St.," "Av.," "Ct.," "Blvd.," "Cir.," etc.)

City _____ State _____ 48 _____
(Zip+4)

E-mail address _____ Telephone (_____) _____

Group or Class Name	Day & Time	Fee

Check here _____ if new member. **TOTAL** _____

NOTE: Add \$10 membership fee *per person* if 2009-10 membership dues have not been paid. (This is a pro-rated 2009-2010 membership fee)

Check your mailing label for date of (e.g., "8/10") membership expiration.

- **Questions? Call 734-998-9351 Or 734-998-9357**
- **For more information: Web site <http://olliumich.org>**
- **Make checks payable to: "OLLI at UM"**
- **Mail or deliver all registration forms and payment to:**

Osher Lifelong Learning, 2401 Plymouth Road, Suite C, Ann Arbor MI 48105