



# OSHER LIFELONG LEARNING INSTITUTE AT GEORGE MASON UNIVERSITY



## MEMBERSHIP DUES INSTALLMENT PLAN AGREEMENT

As a convenience for members, OLLI Mason offers two installment options for paying \$450.00, the full amount of annual dues.

1. Monthly installment plan of **12 equal payments of \$37.50**. Automated payments will occur on the 5<sup>th</sup> of each month.
2. Quarterly installment plan of **4 equal payments of \$112.50**. Automated payments will occur on January 5, April 5, July 5 and October 5. Payment start date depends on the term of enrollment.

Installments are payable with a credit or debit card. Visa, MasterCard or Discover cards are accepted. A receipt will be emailed after each payment is processed.

### Initial ALL of the following statements:

\_\_\_\_ I acknowledge that I am responsible for the full payment of \$450. OLLI cannot refund dues  
*Initial* payments unless qualified under the following OLLI policy;

*Members may only obtain a refund of their dues by applying in writing to the executive director before the beginning of the third week of classes in the first term after enrollment or re-enrollment. We cannot honor proration or reimbursement requests after this deadline and will expect the full year's payments even in the event of a move or other change in circumstances. Members are advised that OLLI's quality programming is presented in-person unless circumstances require that some or all of it be presented remotely, such as via ZOOM technology.*

\_\_\_\_ In the event of any problem with my credit/debit card account, I agree to pay the full  
*Initial* remaining balance of my annual dues, including applicable fees for processing or collection within 30 days of notification by OLLI.

\_\_\_\_ I understand that I must receive approval of this agreement prior to registration  
*Initial* for any OLLI activities, which will come by way of an email of a transaction receipt generated by the registration system.

### Initial ONE of the following options

\_\_\_\_ I authorize OLLI to charge \$37.50 per month for a full year (12 payments) from the  
*Initial* credit/debit card account number listed below.

\_\_\_\_ I authorize OLLI to charge \$112.50 per quarter for a full year (4 payments)  
*Initial* from the credit/debit card account number listed below

I, the undersigned, have read and understand the Installment Plan Agreement and agree to abide by the initialed and acknowledged requirements therein.

**Full Name (printed):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Credit Card**

**Number** \_\_\_\_\_ **Ex. Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Return this completed form to:**  
**OLLI Registrar, Osher Lifelong Learning Institute, 4210 Roberts Road, Fairfax, VA 22032**