

# OLLI Mason Registration Form: Spring 2023

Mail completed form to: Osher Lifelong Learning Institute at George Mason University (write full name), 4210 Roberts Rd, Fairfax, VA 22032

Date Received	_____
Date Processed	_____
Dues Chk _____	CC _____
Spec Chk _____	CC _____
Spec Chk _____	CC _____
FOLLIChk _____	CC _____
CC info destroyed	_____

Check box if there are changes in your membership information since your last submission.

## Membership Information:

Please print and fill in all spaces completely.

Dr. Mr. Mrs. Ms. (CIRCLE ONE) \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
LAST NAME FIRST NAME MI

Alternate First Name for Your Nametag (if different from above) \_\_\_\_\_

Address \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
STREET CITY STATE ZIPCODE

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Preferred Member Portal User Name \_\_\_\_\_ License Plate # \_\_\_\_\_  
(for new members only) 6 OR MORE CHARACTERS

Highest Education Level \_\_\_\_\_

Mason Alumnus?  Yes  No

- Check box if you **DO NOT** want to appear in the directory.
- Check box if you **DO NOT** want to receive paper catalog mailings.

How Did You Learn About OLLI Mason?	
<input type="checkbox"/> Cinema Arts Ad	<input type="checkbox"/> News Article
<input type="checkbox"/> Flyer	<input type="checkbox"/> Print Ad
<input type="checkbox"/> Friend	<input type="checkbox"/> Retirement Seminar
<input type="checkbox"/> Mason Marquee	<input type="checkbox"/> Social Media
<input type="checkbox"/> Other _____	

**Home Campus:**  Fairfax (Tallwood)  Reston  Loudoun  Zoom

## Dues and Donations Information (Please check the appropriate boxes below)

- Annual Membership (\$450)** One year of unlimited courses at OLLI Mason.  
(Offered to new, renewing, and previous members) \$ \_\_\_\_\_
  - Special Spring 2023 Promotional Fee (\$300)** One year of unlimited courses at OLLI Mason.  
(Offered as a onetime discount to those new to OLLI Mason who have never been members, are returning after more than one year's hiatus, or were introductory members who haven't converted to annual members) \$ \_\_\_\_\_
  - Annual Membership Discount for George Mason University or Northern Virginia Public School Retirees (\$150)**  
(Offered as a onetime discount to those who have never been an annual OLLI Mason member) \$ \_\_\_\_\_
  - Introductory Membership (\$150)** One term of unlimited courses at OLLI Mason.  
(Offered ONLY to new members, not renewing or previous members) \$ \_\_\_\_\_
  - Charitable Donation for Friends of OLLI**  
 Check if you want to be an anonymous donor. \$ \_\_\_\_\_
  - Purchase OLLI Mason eGift Card (enter at right the value you want on card)**  
 Mail eGift Card code to recipient  Email eGift Card code to recipient \$ \_\_\_\_\_  
 Recipient's name, address, email: \_\_\_\_\_
- Total** \$ \_\_\_\_\_

By signing this form, I agree to all OLLI Mason policies and procedures, and waive OLLI Mason liability for any bus trip or off-site club activity in which I participate:

\_\_\_\_\_  
Signature

<b>Payment Information:</b>	
<input type="checkbox"/> CHECK payable to Osher Lifelong Learning Institute	<input type="checkbox"/> Installment plan agreement: see page XX for information.
<input type="checkbox"/> eGift Card \$ _____ and Redemption code _____	
<input type="checkbox"/> I authorize OLLI Mason to charge my Credit Card account listed below:	
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER <input type="checkbox"/> AMERICAN EXPRESS	
Credit Card Number: _____	Expiration Date: _____
Signature: _____	CVV: _____
	Billing Zip Code: _____