

# MEMBERSHIP FORM

210 FLAGG ROAD, ROOM 212, KINGSTON, RI 02881

WEB.URI.EDU/OLLI 401.874.4197 OLLI@URI.EDU

MAIL FORM OR REGISTER ONLINE AT [URIOLLI.AUGUSOFT.NET](http://URIOLLI.AUGUSOFT.NET)

## MEMBERSHIP INFORMATION (Please use one form per person)

NEW MEMBERSHIP  RENEWAL MEMBERSHIP RENEWAL DATE: \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Seasonal Address \_\_\_\_\_ Begin Date \_\_\_\_\_ End Date \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

Year of Birth \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relation: \_\_\_\_\_ Phone \_\_\_\_\_

## MEMBER PROFILE

The following information is used to help us better understand our OLLI Membership as a community and to better serve you. This information is optional and confidential.

URI Alumni :  No  Yes Year \_\_\_\_\_ Gender :  Male  Female

Highest Level of Education:  High School  Some College  Associates Degree /Certification  
 Bachelor's Degree  Master's Degree  Doctorate

Employment Status:  Retired  Work Full Time  Work Part-Time  Not Currently Employed

Current/Former Occupation: \_\_\_\_\_

Referral \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

## PAYMENT INFORMATION: Annual Membership Fee \$65 (non-refundable)

Payment Method:  Check (Payable to URI) For mail-in registrations, we only accept check payments.

If you are paying by credit card, please call the office at 401-874-4197 or register online [URIOLLI.AUGUSOFT.NET](http://URIOLLI.AUGUSOFT.NET)

Photos taken during OLLI events or programs can be used in promotion material for OLLI at URI.

OLLI and URI will not be held liable for members or guests for any damage or personal injury.

Your membership must be in effect through the last date of the class(es) you have chosen.

**For questions, please call 401.874.4197 or email [olli@uri.edu](mailto:olli@uri.edu)**

**If mailing, send to: OLLI at URI, 210 Flagg Rd, Room 212, Kingston, RI 02881**

OFFICE USE: DATE RCVD: \_\_\_\_\_ DATE PROCESSED: \_\_\_\_\_ INITIALS: \_\_\_\_\_