

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: _____

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

Payment Method: ☐ Check (Payable to URI) Credit Card: ☐ Visa ☐ Mastercard ☐ Discover ☐ AMEX

Credit Card No. _____ Exp Date: _____ 3 or 4 digit code _____

Name on Card: _____

Signature _____

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@etal.uri.edu

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

OFFICE USE: DATE RCVD: _____ DATE PROCESSED: _____ INITIALS: _____