

## **LLI MEMBERSHIP & ENROLLMENT FORM**

Fee per course: \$30.00			
Name			
Address			
City & State	ZI	P	_
Telephone			
Email			_
(Please write clear	rly, or use capital letters.)		
Birth Date	(Required by NCC)		
Please indicate: Male Female	e		
1st Course			
2nd Course			
3rd Course			
4th Course			
Alternate Course (if closed out of	one choice)		
Membership Dues (O	ONLY if not a current member	\$50.00 \$	
	Total number of courses	<b>x</b> \$30.00 = \$	
	Contribution to LLI Scl	nolarship Endowment _	
	Contribution to NCC Four		
	(Check with employer for m	atching grant)	
		Total \$	
	Make checks payabl	e to <b>Lifetime Learners</b>	Insti
_ I would like to volunteer as a Class	s Assistant		
I prefer to receive catalogs only ov		led 1 week in advance o	of US