Osher Lifelong Learning Institute at CSU, Chico

FALL 2015 MEMBERSHIP FORM

Please check the box(es) if the information is being updated since the last time you registered.

☐ Name ___________________________________________ Member ID # __________________________

☐ Address ___________________________________________ ☐ City ____________________ ☐ Zip __________

☐ Email ___________________________________________ ☐ Phone ______________________________________

OLLI shares our news updates and most other information by email and on our website in order to conserve resources.
If you do not have access to a computer or email account, please check here to receive the information by mail. [ ]

Membership: Sign Me Up!

☐ Annual Membership (Fall, Spring & Summer): $150 ☐ Traditional Membership (Fall & Spring): $120

☐ Check Enclosed, Payable to CSU, Chico Research Foundation ☐ Charge My Credit Card (Enter # Below)

Annual Campaign & Reentry Scholarship Gift Options:

Annual Campaign Gift Amount: ☐ $250 ☐ $100 ☐ $50 ☐ $25 ☐ Other $_________________________

I would like to schedule a Recurring Gift: [ ] Yes Frequency: [ ] Monthly [ ] Quarterly (3 months)

Recurring Gift Start Date: ________/______/__________ # of Gift Payments _________________

Note: Gift Amount above will be charged as the first installment, and will be the amount charged for all subsequent payments.
Example: If you wish to make a $100 gift in four monthly installments, select $25 as your gift amount.

I would like to make an additional donation to the Prime Timers Reentry Scholarship in the amount of: $________________________

☐ Separate Check Enclosed, Payable to CSU, Chico University Foundation ☐ Charge My Credit Card (Enter # Below)

Payment:

☐ Check(s) enclosed. Note: Separate Checks Required for Memberships & Gifts ☐ Charge My Credit Card $________________________

VISA/MC Card # ____________________________ 3- or 4-Digit Card Security Code: __________________________

INFORMED CONSENT AGREEMENT: As a participant in the Osher Lifelong Learning Institute at CSU, Chico, I understand that risk of accident and injuries can arise out of participation in program activities and agree to release from liability and hold harmless the CSU, Chico Research Foundation, its programs, the Trustees of the California State University, and their officers and employees, from claims against them arising from injuries or property damage which might occur in connection with this activity. I certify that I am in good health and have the capacity to participate in programs of this nature. I give permission to be medically treated for illness or injury occurring during participation in the above activity, and certify that I am covered by medical insurance and/or willing to bear financial responsibility for any costs incurred in medical treatment. I also give permission for photos taken during OLLI classes or activities to be published.

Signature (Required): ____________________________

Mail Form & Payment To: Osher Lifelong Learning Institute • 400 W. First Street • Chico, CA 95929-0792 • 530.898.6679