

# OLLI

fall 2009 course registration PLEASE PRINT. Incomplete or illegible forms will be returned without being processed.

FOR OLLI OFFICE USE

Date rec'd: \_\_\_\_\_

Time rec'd: \_\_\_\_\_

Initials: \_\_\_\_\_

Member information:

Name \_\_\_\_\_

Preferred name for nametag \_\_\_\_\_

Address \_\_\_\_\_

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

E-mail \_\_\_\_\_

All members: Please complete the Membership Information on the back of this page and sign the waiver if your course will take you off campus during this term. Each term we publish a directory via e-mail so members can get to know each other. If you DO NOT want your contact information listed, please check here \_\_\_\_\_

Throughout the term, photographs will be taken by staff and other members for use our video scrapbook, publicity materials or bulletin board displays. If you DO NOT want your picture used, please check here \_\_\_\_\_

Individual courses at \$40 each: \$40 x \_\_\_\_\_ = \$ \_\_\_\_\_

\_\_\_ 6 courses per year \$210 \$ \_\_\_\_\_

\_\_\_ 9 courses per year \$275 \$ \_\_\_\_\_

\_\_\_ 15 courses per year \$325 \$ \_\_\_\_\_

\_\_\_ Membership \$25 per year (Required for classes/trips) \$ 25.00

TOTAL AMOUNT PAYABLE \$ \_\_\_\_\_

Please return this form with your check (made payable to Furman University) or credit card information to: OLLI @ Furman University, 3300 Poinsett Highway, Greenville, South Carolina 29613-1511

Credit Card Billing Information (will be destroyed after registration; please print):

Type of Card : \_\_\_ Mastercard \_\_\_ Visa Expiration date: \_\_\_\_\_

Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name on Card \_\_\_\_\_

Course #	Course Name	Day   Time

Event/Trip                      Event/Trip Name                      Day | Time  
Events do not count against the course packages. Please sign the waiver on the reverse side if you are signing up for an event. If unable to attend, you must cancel 24 hours before the event or be charged \$25 fee (you may not sign up for future events until fee is paid).

Event/Trip	Event/Trip Name	Day   Time

Alternate choices for classes and events (strongly recommended to ensure a full course load in the event your first choices are full).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_ I am willing to serve as a Class Liaison for course number \_\_\_\_\_

\_\_\_ I am making a tax-deductible donation to keep OLLI strong. I am enclosing a separate check to Furman University for (mark also on check):  
\_\_\_ The OLLI Building Fund    \_\_\_ The OLLI Support Fund

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membership information and bonus trip release PLEASE PRINT

Name \_\_\_\_\_ Year of birth \_\_\_\_\_ Male \_\_\_\_\_ Female

Year moved to Greenville area: \_\_\_\_\_ City/State moved from \_\_\_\_\_

Are you retired? \_\_\_No \_\_\_Yes What year did you retire? \_\_\_\_\_ If residing in a retirement community, which one? \_\_\_\_\_

Educational background (Please check highest degree and note degree earned)

\_\_\_High School \_\_\_College \_\_\_Advanced Degree Primary discipline \_\_\_\_\_

Occupation (Please be specific, e.g. teacher-elementary grades, civil engineer, etc.) \_\_\_\_\_

In what community activities are you involved? \_\_\_\_\_

Furman affiliation? \_\_\_No \_\_\_Yes \_\_\_Alumnus \_\_\_Parent \_\_\_Spouse \_\_\_Other \_\_\_\_\_

How did you learn about OLLI? \_\_\_Friend \_\_\_Newspaper \_\_\_Picked up OLLI brochure at \_\_\_\_\_

Emergency contact (name): \_\_\_\_\_

Relationship: \_\_\_\_\_ Contact's Phone: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Preferred hospital \_\_\_Greenville Memorial \_\_\_St. Francis \_\_\_Other \_\_\_\_\_

OLLI is a member-run, volunteer organization. Our goal is to have 100% of our membership volunteer with OLLI.

Please check those activities in which you would like to be involved.

- \_\_\_Hospitality \_\_\_Audiovisual \_\_\_Editing/Proofreading \_\_\_Membership
\_\_\_Instructor \_\_\_Telephoning/Filing \_\_\_Photography \_\_\_Organizational Planning
\_\_\_Committee \_\_\_Scrapbook \_\_\_Bulletin Board Design \_\_\_Other
\_\_\_Decorating \_\_\_Room Setup \_\_\_Office Help

I have read and agreed to the CONSENT, GENERAL RELEASE, AND INDEMNITY AGREEMENT on the right:

Participant name \_\_\_\_\_

Signature \_\_\_\_\_ This \_\_\_\_\_ day of \_\_\_\_\_

PLEASE SIGN RELEASE FOR TRIPS or EVENTS REMEMBER TO SIGN RELEASE FORM ABOVE REMEMBER TO SIGN

CONSENT, GENERAL RELEASE, AND INDEMNITY AGREEMENT I, the undersigned, hereby make application to Furman University (herein called "Furman") for the Participant to participate in the OLLI@ Furman Bonus Trips as listed above for the Fall term 2009. In consideration of the acceptance of such application and permission for the Participant to so participate, and for other valuable considerations, the receipt and sufficiency of which are hereby acknowledged, the undersigned hereby jointly and severally agree to: Release, discharge, exonerate and absolve Furman, its officers, trustees, instructors, employees, agents, representatives, successors and assigns from any and all responsibility for, and agree to indemnify each thereof against and hold them harmless from, any and all obligations, liabilities, claims, demands, costs and expense, including reasonable attorney's fees, arising out of or in any way connected, directly or indirectly, with any of the following: A. Any and all claims of whatever kind and nature for injury, loss, damage, accident, delay, irregularity, or expense arising from the use of any vehicle or service, strikes, war, weather, sickness, quarantine, government restrictions or regulations, or from any act of omission of any common carrier, airline, watercraft, railroad, or bus; B. Any intentional or unintentional injury or damage, whether or not resulting in death, to the Participant or the parents or guardian, whether caused by some third party or third person, or caused in whole or in part by the Participant, whether alone or together or in association with others, to any other person or persons; C. Any intentional or unintentional damage or injury to property, whether personal, real or mixed, owned or used by or in the custody or possession of the Participant, whether caused by some third party or third person, or caused in whole or in part by the Participant, whether alone or together with or in association with others; D. Any financial or other obligation incurred by the Participant during the study or travel program, including without limitation, obligations or liabilities incurred by the Participant in any country in which the study and/or travel program take place; E. The taking, processing, publishing or otherwise using of photographs of the Participant, either alone or with others, in any way deemed desirable by Furman in its sole discretion; Furman being hereby granted full permission to so take and use photographs of the Participant. The undersigned Participant hereby consent and agree not to sue or bring suits or equitable action of any kind against Furman University or any of its officers, trustees, instructors, employees, agents, representatives, successors and assigns for or in any matter covered by the foregoing consent, general release and indemnity agreement. We, the undersigned, hereby certify that we each have read the (syllabus, descriptive literature, brochure) for this program and agree without reservation to all the conditions of operation and department set forth therein. In WITNESS WHEREOF, the undersigned have hereunto affixed their respective signatures.



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