

REGISTRATION FORM

•Please fill out and send entire form with payment•

SILIR REGISTRATION FORM (PLEASE FILL IN YOUR NAME AND ADDRESS.)

First Name _____ Last Name _____

First Name _____ Last Name _____

Street _____

City _____ State _____ Zip Code _____

Day Phone Number _____ Cell Phone _____

*E-mail Address _____

NEW MEMBERS: How did you hear about us? ☐ Friend ☐ Newspaper ☐ Social Media/Online ☐ Radio/TV

If you are registering more than yourself for a class/trip, please list the name(s) of the SILIR member you are registering.

Name: _____ (26M0901901) **FY26 Membership Dues**\$25 x _____ = _____

Addtl. Name: _____ **July 1, 2025—June 30, 2026**

INTEREST GROUPS — July 1, 2025—June 30, 2026

Name: _____ (26M0901904) Book Study Group\$10 x _____ = _____

Name: _____ (26M0901905) Lunch Discussion Group\$10 x _____ = _____

Name: _____ (26M0901911) Religion and Stories\$15 x _____ = _____

Name: _____ (26M0901912) London in the Times of Dickens.....\$15 x _____ = _____

Name: _____ (26M0901913) Understanding Diversity.....\$ 5x _____ = _____

Name: _____ (26M0901914) Historical Highlights in So. Ill.....\$ 5 x _____ = _____

Name: _____ (26M0901915) Remembering Columbo.....\$15x _____ = _____

Name: _____ (26M0901916) Stock taking on the first 10 mo. Of Trump....\$15x _____ = _____

TOTAL: \$ _____

LEARNING IN RETIREMENT PROGRAM WAIVER DISCLAIMER: Most SILIR activities require very little mobility. When an activity requires traveling up to 1 mile or more or navigating 10 steps or more, or involves longer waiting or standing times, we will alert you so that you may choose wisely.

Signature _____ Date _____

My signature confirms that I have read and understand the activity level of any trip sponsored by Learning in Retirement and accept the risks and conditions of the trip. I am aware that some trips may encounter rough terrain and closed-toe shoes will aid in maintaining my safety.

Please submit a check payable to "SIU Carbondale" or credit card information below.

Credit Card Number _____ Exp. _____

Name on Card _____ CVC _____

Email (for receipt): _____

**Mail to: Events & Outreach
Anthony Hall - Mail Code 6705
Carbondale, IL 62901**

**or call Registration at 618-536-7751 to
register with your credit card.**