

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: _____ (24M0901901) **FY24 Membership Dues**\$25 x _____ = _____Addtl. Name: _____ **July 1, 2023—June 30, 2024****INTEREST GROUPS** — July 1, 2023—June 30, 2024

Name: _____ (24M0901902) Monthly Musicals\$10 x _____ = _____

Name: _____ (24M0901904) Book Study Group\$10 x _____ = _____

Name: _____ (24M0901905) Lunch Discussion Group\$10 x _____ = _____

FALL SESSIONS

Name: _____ (24M0901909) "Golden Age of Narrative American Network Radio, 1920-950's"\$15 x _____ = _____

Name: _____ (24M0901910) "Classic Short Stories"\$15 x _____ = _____

Name: _____ (24M0901911) "Politics and the Law"\$15 x _____ = _____

Name: _____ (24M0901912) "Explore the Treasures of Anna"\$0 x _____ = _____

Name: _____ (24M0901913) "Explore Chautauqua Bottoms"\$0 x _____ = _____

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.**