

REGISTRATION

Complete one form for EACH person.



First Name _____ Last Name _____

Complete the information below only if you are a new member or your information has changed.

Preferred name for badge _____ Birthdate _____

Address _____ City _____ State ____ Zip Code _____

E-mail Address _____

Phone: Home _____ Cell _____

If you are a **new member referred** by a current OLLI member, who was it? _____

☐

I have read and understand the Waiver and Release of Liability for OLLI.

☐

I would like to be assigned an OLLI ambassador. An ambassador will help you navigate the OLLI program.

☐

I have read and understand the Personal Image Release in the General Information and Policies. I hereby grant permission to use my photograph/likeness for promotional, advertising, or publication purposes.

Reg. Rec'd	CCE Entry	Type	Codes
By _____	By _____	_____ Registration	CC Auth Code _____
Date _____	Date _____	_____ Refund/Cancellation	Order # _____

2026-2027 Membership Registration -- Check One			Cost
☐	I am a current 2026-2027 OLLI member.		\$0
☐	I am purchasing a 2026-2027 annual membership (Valid through July 31, 2027).		\$75
Course or Event Registration:			
Number	Name		Cost
Total Payment (Membership + Course Cost + Event Cost)			

Payment Method:

Check or money order payable to *University of Nebraska-Lincoln* Check # _____ Amount _____

Credit Card ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Credit Card Number _____ **Expiration Date** _____

Return payment to: Osher Lifelong Learning Institute, University of Nebraska-Lincoln, 105 Newkirk Human Sciences Building, P.O. Box 830800, Lincoln, NE 68583-0800