

**OSHER LIFELONG LEARNING INSTITUTE**

at

CALIFORNIA STATE UNIVERSITY, EAST BAY

**MEMBERSHIP FORM**

**Personal Information**

First Name \_\_\_\_\_ Last Name: \_\_\_\_\_

2nd Member:

First Name \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Membership Type:** New  Renewal

• Yes • No I would like to receive the OLLI at CSUEB electronic newsletter.

**Membership Package**

• One Year Membership, Individual..... \$40

• One Year Membership, Couple..... \$60

• Multi-year (5 year) Membership, Individual..... \$150

• Multi-year (5 year) Membership, Couple..... \$200

**Sub total: \$ \_\_\_\_\_**

***Please include 10% of total amount for check handling fee:*** \$ \_\_\_\_\_

**Total Due: \$ \_\_\_\_\_**

• Check enclosed payable to **OLLI-CSUEB**

• Please charge my: • MasterCard • Visa • Amex • Discover Security Code # \_\_\_\_\_

Acct Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp: \_\_\_\_ - \_\_\_\_

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Mail to:** OLLI at CSU East Bay, Concord Campus, 4700 Ygnacio Valley Road, Concord, CA 94521