

# Membership Fee Financial Assistance

Name	Phone
Email	

#### ASSISTANCE AMOUNT APPLIED FOR: \$

Please explain below why paying the \$150 annual OLLI at SOU membership fee is a challenge. Specific financial information is not necessary, but enough detail is needed to make a determination of your individual need. This information will be kept confidential.

OLLI at SOU members are welcome and encouraged to support the success of our program by volunteering their time and talents. Would you be interested in learning more about volunteer opportunities?

□ Yes □ Maybe □ Not at this time

Return completed form to the OLLI at SOU Administrative Director.

*by mail* OLLI at SOU 1250 Siskiyou Blvd Ashland, OR 97520 *in person* SOU Campbell Center 655 Frances Lane Ashland, Oregon

### Please turn over to complete page 2 of the membership application.



## Membership Fee Financial Assistance

Membership: 
□ new member □ renewing member

tion	First name		Middle initial	Last name	
rmai	Date of birth	Day phone		Cell phone	
Member Information	Street address				□ This is a change of address
nber	City		State	Zip	
Mer	Email address				□ This is a change of email
	Emergency contact			Phone	
	Relationship to member			🗆 I want to op	t out of receiving a print catalog

### FOR OFFICE USE ONLY

<b>The OLLI at SOU membership fee is nonrefundable.</b> Reduced-fee memberships are non-transferable and valid for the current academic year only. Checks and credit cards are accepted.						
Annual membership fee:	<u>\$</u>					
Financial assistance amount:	\$					
Total payment amount:	\$					
□ Check: Make check payable to "OLLI at SOU".						
Credit card: VISA MasterCard						
Card number:						
Expiration date: / 3- or 4-digit secu	3- or 4-digit security number on back of card:					
Signature:						
Note: The Administrative Director will work with you to determine fee assistance and payment amount.						