## **Membership Form** □ NEW MEMBERSHIP □ RENEWAL MEMBERSHIP Please use black ink. Print clearly. Please complete payment information. This form is also available online at osher.richmond.edu

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<b>Member Information</b> Today's Date						
Name	Preferred Name					
UR ID Number	Date of Birth / /					
Home Address						
City	Stat	e Z	ip Code			
Telephone (Day)	(Evening)	(Cell)	r			
Email		US Citizen ☐ Yes ☐ No	Gender ☐ Male ☐ Female			
Prior or Current Occupation		Prior or Current Emplo	yer			
Ethnicity/Race (Optional)  1. Are you Hispanic/Latino? ☐  2. Regardless of your answer to ☐ American Indian or Alask: ☐ Native Hawaiian or Other  3. Do you require any special a	Yes, Hispanic or Latino the prior question, please se a Native ☐ Asian ☐ Black Pacific Islander ☐ White	No elect one from the following ethnic or African American  ate in our programs?Yes				
Name		Telephone Number				
Your membership is valid for on osher.richmond.edu.	e year from the date you joing Please year from the date you joing SILVER \$75 are is noted for each course)	se select your annual membersh  n. Member benefits are detailed  Upgrade \$275  From Silver to Gold  (May upgrade within the first six n  of annual membership)	☐ Upgrade \$325 From UR Osher to Gold			
Osher Lifelong Learning Institute Osher Institute		also drop off your form: te Office rams Building (490 on UR Campus Map)	(May upgrade within the first six months of annual membership)  Scholarships for course fees are avail- able. For information, contact Peggy Watson at (804) 287-6344			
Osher Institute. Your gift is a gift of e	of the Osher Institute are encoul ducation and exploration that he sher Institute fees affordable. Fo	raged to consider tax-deductible gifts t lps us continue to provide excellent lif r details on making a gift, please conta	elong			
Payment Information Your par □ Check. Please enclose check AND COURSE REGISTRATION	made payable to University o	f Richmond. WHEN PAYING BY	CHECK, PAYMENT OF MEMBERSHIP FORM			
·		kpress. (Credit card information is				
Please complete the following: F	'lease charge my: ☐ VISA ☐	MasterCard □ American Expre	SS			
Account Number		Expiration Date	CVV code			
Cardholder's Name: (as it appea	rs on the card)					
Signature	Amount to be Charged \$					