

Fall 2018 Explorers Membership/Registration Form

Name _____ Date _____

Last First M.I. Nickname (for name tag)

Address _____
Street City/State Zip

Home Phone () _____ Other Phone () _____

E-mail Address _____

Emergency Contact _____ Phone() _____ Relationship _____
(MANDATORY)

Alternate Emergency Contact _____ Phone () _____ Relationship _____

Procedure for Registration

Courses will be assigned on a space available basis. Applicants not admitted will be placed on a waiting list. Your first course choice will be given assignment priority. If first choice courses become oversubscribed class participants will be selected in the following order: 1. New members 2. Members who have selected the course as their first choice.

COURSE SELECTIONS: LIST THE COURSES IN ORDER OF PREFERENCE.

You may enroll in up to five courses per semester, exclusive of Book Club, Friday Coffees and Writers Group.

Fall 2018 Semester

Course Number	Course Title	I will be Class Assistant Attendance / Coffee/Equipment
		(A) (C) (E)
1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

BOOK CLUB **WRITERS GROUP**

Registrations are accepted on a year round basis. In the event that a course is oversubscribed, enrollment will be based on a review of all applications received on or before Thursday, July 26, 2018. Members may not attend classes without prior registration.

For office use only:
 Received by: _____ Date: _____
 Amount Received: Full Year _____ Half Year _____
 Date Entered in Computer: _____ Initial: _____
 Cash: _____ Check: _____

**PLEASE NOTE: 12 MONTH/6 MONTH
NONREFUNDABLE MEMBERSHIP FEES**

July 1, 2018 to June 30, 2019

- Single membership \$265 \$ _____
 - Spousal membership \$455 \$ _____

July 1, 2018 to December 31, 2018

- Single membership \$150 \$ _____
 - Spousal membership \$260 \$ _____

TOTAL: \$ _____

**Make check payable to: Explorers LLI
 Send completed form and check to: Explorers LLI
 10 Federal Street, Suite 10, Salem, Massachusetts 01970**

*****PLEASE COMPLETE THIS FORM ON REVERSE SIDE*****

YOUR PRINTED NAME: _____

Dear Member: Explorers are a diverse group with a multitude of experiences and interests. In order to better serve you and the entire organization, we'd like to know more about you and hope you are willing to participate in Explorers in whatever ways are comfortable for you.

IMPORTANT: Photos of Explorers members and activities, mostly group shots, appear in our print and electronic media. Names are not included in group shots. If you prefer not to be included, please contact Dawn, Explorers Office Manager.

I would like to see a course on _____

I am interested in coordinating or leading a course or in doing a one-time presentation. Yes ___

I am willing to do this because of my past work experience, volunteer experience and/or hobbies or special interests (please explain)

I would like to be a class assistant. Please circle: coffee, attendance or equipment Yes ___

I would like to be on one of the following Standing Committees (a wonderful way to get to know other members and to make a contribution to Explorers): Yes ___

Compass: (quarterly newsletter)____ Curriculum: (development of courses)____

Recruitment/training of leaders:____ e-Communications:____

Facilities: (physical plant improvements, room assignments)____

Membership: (recruitment/orientation of new members)____

I would be willing to work on the following activities: Special Events, parties, meetings, etc.:____

Volunteers – recruit, train, supervise members for class assistants*, office work, etc.:____

Publicity:____

*Class Assistants help by choosing any of the following: run the A/V equipment; set up classrooms; setting out and/or cleaning up coffee equipment or taking attendance and assisting the presenter. Assistance in learning to operate the A/V equipment will be provided.

Please indicate your interest _____

*****Thank you for completing this form!*****