



Please register online at <http://portfolio.du.edu/ollioncampus>

Mail-IN Registration Form – OLLI-on-Campus

NAME: _____

Are you a NEW member? _____ If yes, how did you hear about OLLI? _____

If yes, How would you like your name to appear on your nametag? _____

ADDRESS _____ CITY _____ Zip _____

PHONE _____ EMAIL _____

OLLI-on-Campus Classes

▶▶▶ I would like to participate in a TOTAL of _____ classes ◀◀◀

(Office use only)

#	Class Name – Please list in order of preference	Day	Time AM or PM	Class Fee (If Applicable)	Site S, W, C, OOC, E, B	Specific location (name of church or building)	Class Assistant – Yes or No
1							
2							
3							
4							
5							

All classrooms are handicap accessible.

REMEMBER TO ENCLOSE YOUR \$130 TUITION CHECK. Class Instructor fees must be paid with a separate check.

Please make check payable to OLLI and mail with your registration requests to:

**OLLI-on-Campus
UNIVERSITY COLLEGE, UNIVERSITY OF DENVER
2211 South Josephine Street
Denver, Colorado 80208-8301**

You will receive a confirmation of classes via email.

Check(s) enclosed:

_____ Tuition: \$130 per term, per person

_____ Instructor fee for each OLLI-on-Campus class

_____ Total Fees: No refunds unless the class is cancelled.