

**LIFETIME LEARNING INSTITUTE OF AUSTIN**  
**OFFICIAL CLASS REGISTRATION FORM** Phone: 512-206-4232

**ONE CARD PER PERSON, PLEASE.**

PLEASE PRINT CLEARLY Term/Yr \_\_\_\_\_ Are you a new LLI student? Please check: Yes \_\_\_\_\_ No \_\_\_\_\_

LAST NAME	FIRST NAME	INITIAL
STREET ADDRESS -APT. NO.	CITY	ZIP
E-mail Address _____		Telephone No. _____

**CLASS NO.**      **CLASS TITLE**      **\$30.00 PER CLASS**


*The information provided on this form will be entered into LLI's EventBrite registration system to allow EventBrite to email you confirmation of enrollment and to compile LLI student data.*

**Make check payable and mail to:**  
**Lifetime Learning Institute**  
**7703 N. Lamar, Suite 102**  
**Austin, TX 78752**

By signing below, I completely release and hold harmless Lifetime Learning Institute and each and every representative, officer, volunteer, site provider, and agent of each of these from liability or responsibility for any and all claims, damages, injuries, losses, or causes of action that may result from or arise out of my participation in LLI activities.

**Signature required for registration and waiver.**      Total \$ \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

For office use: Computer entry \_\_\_\_\_ Refund \_\_\_\_\_ Transfer \_\_\_\_\_