

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

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

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

CLASS NO.	CLASS TITLE	\$20.00 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 to LLI and mail to: 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.

Lifetime Learning Institute
 7703 N. Lamar, Suite 102
 Austin, TX 78752

Signature required for registration and waiver.

Total \$ _____

SIGNATURE _____

For office use: Computer entry _____ Refund _____ Transfer _____