THE SECOND HALF: LIFELONG LEARNING INSTITUTE REGISTRATION FORM – FALL 2021

Name	me Home Phone						
Street Addr	ess	Cell Phone					
City		State Zip Code					
Email							
Emergency	Contact	Contact Phone					
	ARE YO	OU NEW TO THE SEC	COND HALF?	YES NO)		
IF YE	S, PLEASE CO	OMPLETE THE MEN	MBERSHIP FOR	RM ON THE REV	ERSE SIDE.		
STUDY GI	ROUP SELECT	ΓIONS.					
Please use	the number of	the study group, not t	the name, in con	npleting your reg	istration.		
REGISTRA	ATIONS ARE	FIRST COME/FIRST	SERVED. Regi	strations received	on or before		
September	1 will be date s	stamped with that date	and processed f	first.			
(1) #	(2) #	(3)#	(4) #	(5) #	· 		
(6) #	(7) #	(8)#	(9) #	(10) #			
Priority req	uest for #						
	\$50.00 Membership dues						
	\$150.00 Tuition for up to two study groups						
		litator. My tuition is wai	ived.				
		Donation					
\$	TOTAL A	MOUNT DUE					
MA 02720.	paying by credi	e to <i>The Second Half</i> an					
		Credit card	number	 Exp. Date	Security Code		

THE SECOND HALF LIFELONG LEARNING INSTITUTE MEMBERSHIP FORM 2021-2022

Members new to The Second Half: <u>Please complete this form.</u>
We would like to get to know you better and ask that you respond to the following questions.

This information will allow us to better plan classes, trips, and special events.

Name	Street	Street Address				
City	State		Zip Code			
Telephone	Email					
How did you hear about The S	Second Half?					
Age? Under 50 50-55						
76-80 81-85	86+					
Are you retired?	Do	you work pa	art time?			
Please describe your volunteer	r activities/hobbies/	interests				
In what areas would you like us t	to offer classes, trips,	special event	s?			
Membership is \$50.00 per yea		•	1, 2022			
Please make check payable to	The Second Half ar	nd mail to				
The Second Half PO Box 9333						
Fall River, MA 02720						
If you are mailing your Memb	orchin Form and ar	a navina by	aradit aard nlagga	a complete the		
following:	cisiip i oiii and aiv	c paying by	credit card, picase	complete the		
Name as it appears on card	Credit card	number	Exp. Date	E Security Code		
* *	not retain your ci		•			