

# THE SECOND HALF: LIFELONG LEARNING INSTITUTE REGISTRATION FORM – SPRING 2024

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Street Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

**ARE YOU NEW TO THE SECOND HALF?    \_\_\_ YES    \_\_\_ NO**

**IF YES, PLEASE COMPLETE THE MEMBERSHIP FORM ON THE REVERSE SIDE.**

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## **STUDY GROUP SELECTIONS.**

Please use the number of the study group, not the name, in completing your registration.

**REGISTRATIONS ARE FIRST COME/FIRST SERVED. Registrations received on or before September 1 will be date stamped with that date and processed first.**

(1) # \_\_\_\_\_ (2) # \_\_\_\_\_ (3) # \_\_\_\_\_ (4) # \_\_\_\_\_ (5) # \_\_\_\_\_

(6) # \_\_\_\_\_ (7) # \_\_\_\_\_ (8) # \_\_\_\_\_ (9) # \_\_\_\_\_ (10) # \_\_\_\_\_

(11) # \_\_\_\_\_ (12) # \_\_\_\_\_ (13) # \_\_\_\_\_ (14) # \_\_\_\_\_ (15) # \_\_\_\_\_

If you registered for a class in the FALL and did not get in, you may request priority admission to the SAME class if it is offered again in the spring. **Please make your request as soon as registration opens.**

Priority request for # \_\_\_\_\_

\_\_\_\_\_ **\$50.00** Membership dues if you did not pay in the fall or are joining for the first time

\_\_\_\_\_ **\$150.00** Tuition for up to two study groups

\_\_\_\_\_ \$ \_\_\_\_\_ Tuition for additional study groups (\$30.00 per study group)

\_\_\_\_\_ I am a facilitator. My tuition is waived.

\_\_\_\_\_ \$ \_\_\_\_\_ Donation

**\$ \_\_\_\_\_ TOTAL AMOUNT DUE**

**Please make checks payable to *The Second Half* and mail to The Second Half, PO Box 9333, Fall River, MA 02720.**