

**ESILL Course Registration Form
Fall 2017 Term**

Call the instructor to register. **Your seat will be reserved when the instructor receives the tuition.**
Mail this form to the instructor with your **tuition check made payable to ESILL.**
Write the course name and "Member" on your check if it applies.

Additional material fees, posted on the course schedule, are to be paid directly to the instructor in the classroom.
DO NOT COMBINE THE TUITION AND MATERIAL FEES IN A SINGLE CHECK, AND PLEASE PRINT!

Date _____ Course Name _____

Student's Name(s) _____ Gender M__ F__

Permanent Mailing Address: _____

Phone _____ E-Mail Address _____

Are you a member of the Friends of ESILL? Yes___ No___
If so, take \$5 off your tuition. If not, please see below.

Please cut and retain this section

Refunds for Course Withdrawal: If you notify your instructor *prior to the second class* that you wish to withdraw, your tuition will be refunded. We cannot provide a refund after the second class.

*Are you interested in teaching or have a course request?
Call our Curriculum Planning Chair, Laurie Wiggins, at 990-5555.*

We are supported by **The Friends of ESILL**, a group of interested persons who believe in ESILL's mission and are willing to contribute a modest amount to sustain "The School for the Fun of It". For an annual membership fee of \$35, you will enjoy course flyers mailed to your home, newsletters, and invitations to receptions featuring guest speakers. To show our appreciation for your support, we will provide you a \$5 discount on any courses you and your immediate family members take until the end of 2018. To get on the ESILL team, download the application form on The Friends of ESILL page or call the Membership Chair, Dot Bremer. Her number is 604-9342.

Join now and enjoy course discounts for the entire year!

FRIENDS OF ESILL MEMBERSHIP APPLICATION

Mail your \$35 check payable to ESILL to
The Friends of ESILL, 155 Cypress Lane, Fairhope, AL 36532

DO NOT SEND TUITION CHECKS TO THIS ADDRESS.

Questions? Call Dot Bremer at 604-9342.

Name(s) _____

Permanent Mailing Address _____

Tel _____ E-mail Address _____