

ESILL Course Registration Form **PLEASE PRINT.**

**Make checks payable to ESILL and mail to the instructor. Separate checks and forms are required for each course.
Write course name and "Member" on your check if it applies. There may be a materials fee, to be paid to the instructor.**

Date _____ Course Name _____

Student's Name _____ Gender M___ F___

Permanent Mailing Address: _____

Phone _____ E-Mail Address _____

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

Are you a Snowbird? No___ Yes___

Please check all that apply:

How did you learn about this course? Website___ Ad___ Flyer___ Catalogue___ News article___ Friend___

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 Chair, Laurie Wiggins, at 990-5555.

We rely on the support of The Friends of ESILL, a group made up of interested persons who believe in ESILL's mission and are willing to contribute a modest annual membership fee in the pursuit of "School for the Fun of It". The Friends of ESILL helps us keep tuition at a low \$4.50/hour and affords our members the opportunity of fellowship with our directors, students, and instructors. Members are invited to two educational/social events each year, receive a \$5 discount on their registration fee for any courses they or their immediate family members take, receive catalogues mailed to their home and enjoy other benefits. If you might be interested in getting on the ESILL team, please call Dot Bremer at 604-9342 and fill out the membership application form below. **Join now and receive discounts for all of 2015.**

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 _____