



- New member
- Returning member

Telephone: 336-278-7431
 Email: kbennett9@elon.edu
 Website: <http://www.elon.edu/lifeatelon>

MEMBERSHIP APPLICATION

One application per member. PLEASE PRINT CLEARLY.

Date: _____

Title: Mr. Mrs. Ms. Dr. The Rev. other: _____ None

Name: _____

First

Middle Initial

Last

Nickname (what you want to be called, this will be on your nametag): _____

Address: _____

City, State Zip _____

Home Phone: _____ Cell Phone: _____

*E-mail: _____

**If you want to receive updated LIFE@ELON information and any class notifications.*

Class preference: Tuesday Morning (10:00 - 12:00) Tuesday Afternoon (1:30 - 3:30) Wednesday Morning (10:00 - 12:00) Wednesday Afternoon (1:30 - 3:30)

(Please rank your preferences 1-4, note: preferred classes are not guaranteed)

NEW MEMBERS: If our membership is full, would you like to be put on our waiting list? Yes No
(Applications are processed in order by the date the names were added to our waiting list.)

Elon Alum: Yes No If yes, Class Year: _____

Elon Parent or Grandparent: Yes No If yes, Class Year(s) of student(s): _____

Retired (or Former)

Elon Faculty or Staff: Yes No If yes, Department: _____

Hobbies/Interests: _____

How did you hear about LIFE@ELON? _____

Yearly dues are \$150.00 per academic year, per person, regardless of what point in the year the membership starts or how many classes are attended. PLEASE NOTE THAT DUES ARE NON-REFUNDABLE AFTER THE START OF THE FIRST CLASS.

By signing, I acknowledge that my dues are non-refundable after the first class: _____

(Signature)

Checks preferred, please make payable to:

ELON UNIVERSITY

Mail to: LIFE@ELON
 Attn: Kathryn Bennett
 Campus Box 2615
 Elon University
 Elon, NC 27244