



Five College Learning in Retirement

SEMINAR REGISTRATION FORM – SPRING 2018

COMPLETED REGISTRATIONS RECEIVED BY **DECEMBER 8, 2017**
WILL BE ELIGIBLE FOR THE LOTTERY.

Registrations received after this date will be added on a space-available basis,
or to waiting lists.

YOUR NAME _____	DATE ____/____/____
E-MAIL _____	PHONE ____-____-____

ENTER THE **TOTAL NUMBER OF SEMINARS AND WORKSHOPS** YOU WISH TO TAKE:

LIST YOUR CHOICES **IN ORDER OF PREFERENCE:**

COURSE #

SEMINAR/WORKSHOP NAME

1		
2		
3		
4		
5		
6		

I WISH TO CO-REGISTER FOR MY FIRST-CHOICE SEMINAR with another member.

THAT PERSON'S NAME: _____

- The class must be BOTH members' FIRST CHOICE.
- Each individual co-registrant must submit a separate registration form, and state the name of the person with whom they wish to co-register.

SEND YOUR COMPLETED REGISTRATION FORM TO:

5CLIR, 18 Henshaw Avenue, C2, Smith College, Northampton, MA 01063

OR REGISTER ONLINE AT: www.5CLIR.org/programs