OLD DOMINION UNIVERSITY
Institute for Learning in Retirement

Membership Form

To join for the year **June 1 through May 31**, fill out the information below:

Last Name: ___________________________________ First name(s) ___________________________________

Address: ______________________________________________________________________________________

City: ______________________________________ State: ______ Zip: ____________

Phone Number: _______________________________ E-mail Address: ________________________________

Dues for the full school year (June 1 through May 31) are: **$15.00 per person**

Make check payable to: **ILR**

Mail the check with this form to: **Institute for Learning in Retirement**
1881 University Drive
Room 125
Virginia Beach, VA 23453

The ILR does not discriminate with respect to race, religion, sex, color or national origin.