



Learning in Retirement
New Member Form - Half Year /
January - June

Name		
Email address:		
Address		
City	State	Zip
Home Phone ()	Cell Phone	
Age: (Please circle one) Under 55	55-64 65-74 75-84	85+
How did you hear about LIR? (If re Community Function Newspaper/Media Other	□ Website □ LIR Member	e provide their name.)
 What was your pre-retirement area Business Healthcare Other	 Education Law/Government 	
 Budgeting Contacting Speakers Delivering Catalogs Event Planning 	How will you contribute to the of Photography Planning Tours Policy/Procedure/Bylaws writing Posting on LIR's Facebook page	Writing News Articles
Half Year Membership Fee: (Janual Optional: Please consider a donat continued programming:	ry 31 to June 30) tion to Evergreen Foundation to	\$ 50.00
TOTAL ENCLOSED	□ Other \$	\$ \$

Make checks payable to: Evergreen

Mail your completed form and check to:

Evergreen Attn: LIR 1130 Westfield Street Oshkosh, WI 54902

Thank you for your LIR membership! We look forward to your participation!