

Registration Form Summer 2009

Name _____

Address _____

City _____ State _____ ZIP _____

Phone (_____) _____

E-mail Address _____

Form of Payment (circle one): Visa Mastercard American Express
Check (made payable to UW-L)

Credit Card # _____ - _____ - _____ - _____

Exp. Date: ____ / ____

Cardholder's Signature _____

Print Name of Cardholder _____

Yes, I would like to make a contribution to the LIR Foundation. Amount: \$ _____

___\$35 Membership fee (41-00) (July 1, 2009-June 30-2010)

___\$ _____ (fill in amount) Storytelling on the Mississippi (44-50)

___\$9.50 (member fee), ___\$14.50 Harmony Valley Farm (44-51)

___\$0 (member fee), ___\$5 Genoa National Fish Hatchery (44-52)

___\$64 (member fee), ___\$99 (non-member fee) Shakespeare Festival (41-50)

___\$11 (member fee), ___\$15.79 (non-member fee) West Salem Trip (41-51)**

___\$0 (member fee), ___\$5 (non-member fee) Diabetes (41-52)

___\$0 (member fee), ___\$5 (non-member fee) Vision Loss (41-53)

*Travel talks are open to members and non-members. \$5 fee applies to non-members only. Participants must register in advance. You may bring your own lunch or purchase it at Cartwright Center for these Travel Talks.

**West Salem trip: ___vegetarian meal option

Return this form and method of payment:

By Mail: UW-La Crosse, Continuing Education
1725 State Street, 205 Morris Hall
La Crosse, WI 54601

By Fax: 608.785.6547

By Phone: 608.785.6504; toll-free 1.866.895.9233