

# SUMMER/FALL 2009

**JULY - DECEMBER REGISTRATION FORM**

View the **CURRENT CATALOG** on-line...[www.TheVillagesLifeLongCollege.com](http://www.TheVillagesLifeLongCollege.com)

**Please Print Clearly**

**Changes:** Course changes, fees, and program requirements are subject to change without advance notice. TVLLC reserves the right to cancel, postpone, or combine courses, to limit registrations, and to change instructors. We regret any errors in printing, but accept no liability for them.

Please visit **page 2** in this catalog to read our registration guidelines. By registering for a course, you are agreeing to our registration, cancellation and transfer policies.

## Payment Information

Payment must accompany  
Registration Form

### METHOD OF PAYMENT

**Check or Money Order**  
(Payable to TVLLC - Attach to this form)

**Check #:** \_\_\_\_\_ **Cash:** \_\_\_\_\_



**MAIL** Registration to:  
TVLLC, 275 Buffalo Trail  
The Villages, FL 32162



**If using a Credit Card**  
**FAX** Registration Form to:  
(352)-750-6047



**or CALL** to Register:  
(352)-753-3035

First/Last Name (and or Company Name) \_\_\_\_\_

Patron Status  
Active?  
 Yes  No

Mailing Address \_\_\_\_\_

(\_\_\_\_)\_\_\_\_  
Home Phone

(\_\_\_\_)\_\_\_\_  
Work Phone

Gender  
 M  F

City \_\_\_\_\_

State \_\_\_\_\_

Zipcode \_\_\_\_\_

Villages ID Number(s) (6 Digit Number) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Have you ever registered for a TVLLC course before?  Yes  No If Yes, most recent: \_\_\_\_\_  
Month Year

Course Number	Course Title	Start Date & Time	Course Fee



**Yes**, I would like to be a Patron.  
\$50.00 - Individual  
\$75.00 - Household\*

\* "Household" means up to  
(2) people living at the same  
unit/lot number with a valid  
Villages ID.

**Subtotal:** \$ \_\_\_\_\_

**Credit Card Information:**

MasterCard  Visa

**Amount:** \$ \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Holder's Name (Please Print) \_\_\_\_\_

### OFFICE USE ONLY

Walk  Phone  Mail

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Receipt Date Time

Paid By \_\_\_\_\_

Staff Initials \_\_\_\_\_