Forever Learning Course Registration Form

Please fill out completely and return or mail to the FLI office Date _____

A separate form is required for each student

Name: _____ M / F ☐ ☐ Phone (H) _____

Last First Mi Phone (C) _____

Address: _____ Birth Year _____

City: _____ State: ___ Zip: _____ Email: _____

Emergency Contact: _____ Emergency Phone: _____

Course Name	Day	Time	Tuition
1.			
2.			
3.			
4.			

Please accept this donation to Forever Learning Institute _____

Make Checks Payable to: Forever Learning Institute **TOTAL $** _____

PLEASE SIGN WAIVER AS READ AND AGREED WITH: I agree to release, discharge and hold harmless and indemnify The Forever Learning Institute, Inc. (FLI) its agents, instructors, employees, or other entities acting on its behalf from all claims, demands, rights, and causes of action of any kind. I, hereby, waive all claims from personal injury or property damage arising from my activities or use of the facilities and equipment at FLI and all offsite facilities and I accept, assume, and incur all responsibility for risk of injury from such activity and exercise. I also agree to allow any pictures taken of me during classes or activities at FLI, to be used in publications/publicity for Forever Learning.

→ **SIGNATURE REQUIRED** _____

Scholarship Application Form

In keeping with our Mission, Forever Learning offers scholarships to assist with the cost of classes. Scholarships are based on need and space availability. Please return this form with your registration to the FLI office to request a scholarship.

Name: _____ Phone (H) _____

Last First Mi

Address: _____ Phone (C) _____

City: _____ State: ___ Zip: _____ Previous Student? Yes / No

Course Name	Day	Time
1.		
2.		

Scholarship Approved By _____ Date _____