

Fall 2026 REGISTRATION
PLEASE PRINT CLEARLY
Online Registration Opens August 4

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____

Cell Phone (_____) _____

Cell Phone Provider ** _____

E-mail address _____ (please print clearly)

In case of emergency, contact & phone _____

For ORICL office use only

Date/Time
Received _____

Member Y/N _____

Payment Method _____

Entered in ProClass _____

Entered in Outlook _____

List classes/activities

Class Number	Title	Class Assistant Y/N?
1. _____ / _____		
2. _____ / _____		
3. _____ / _____		
4. _____ / _____		
5. _____ / _____		
6. _____ / _____		
7. _____ / _____		
8. _____ / _____		
9. _____ / _____		
10. _____ / _____		

****In the event of a last minute class/activity cancellation, we will notify members via e-mail. If you would like to be notified via text message please list your cell phone provider, e.g. Verizon, AT&T, Sprint, etc. (Note: Third party carriers such as Consumer Cellular and TracFone do not offer this service.)**

If you wish to request additional classes/activities, please list on a separate sheet of paper and attach to this form. The initial cap of 10 requests will be lifted after all paper registrations have been processed.

ORICL reserves the right to take photographs in ORICL classes and on trips. Photographs may be used in ORICL newsletters, brochures, course catalogs, and/or other publicity designed to help the organization meet its mission.

Special Instructions for Registration

If you have special needs for any class/excursion, please let us know in the space below:

Mail forms to ORICL, 701 Briarcliff Avenue, Oak Ridge, TN 37830. Fall is membership renewal time! Please make your membership payment online with a credit card (\$190 plus \$6 processing fee) or send a check or cash payment to the office (\$190 payable to ORICL). Donation information is listed in the box below. Donations will be acknowledged annually in the ORICL newsletter – *The ORICL Oracle*, unless indicated otherwise. Thank you for your support.

Do not send class fees until you receive your schedule or e-mail confirmation of your classes and trips. All fees are due September 14, unless otherwise communicated via email.

I want to volunteer:

_____ Class Assistant

_____ Instructor (please list a proposed topic)

_____ Curriculum Committee

_____ Member Events/Office (Receptions for
Special lectures)

If you have suggestions for a future class, please list them below:

If you are a new member, how did you hear about ORICL? _____



Donation Levels

_____ I wish to be an ORICL Friend. Enclosed is a check for \$215 (\$190 membership fee and \$25 donation). Would you like your name omitted from the newsletter?
Please circle – Yes or No

_____ I wish to be a Sustaining Member. Enclosed is a check for \$240 or more (\$190 membership fee and \$50 or more donation). Would you like your name omitted from the newsletter?
Please circle -- Yes or No

_____ I wish to be a Sponsoring Member. Enclosed is check for \$290 or more (\$190 membership fee and \$100 or more donation). Would you like your name omitted from the newsletter?
Please circle – Yes or No