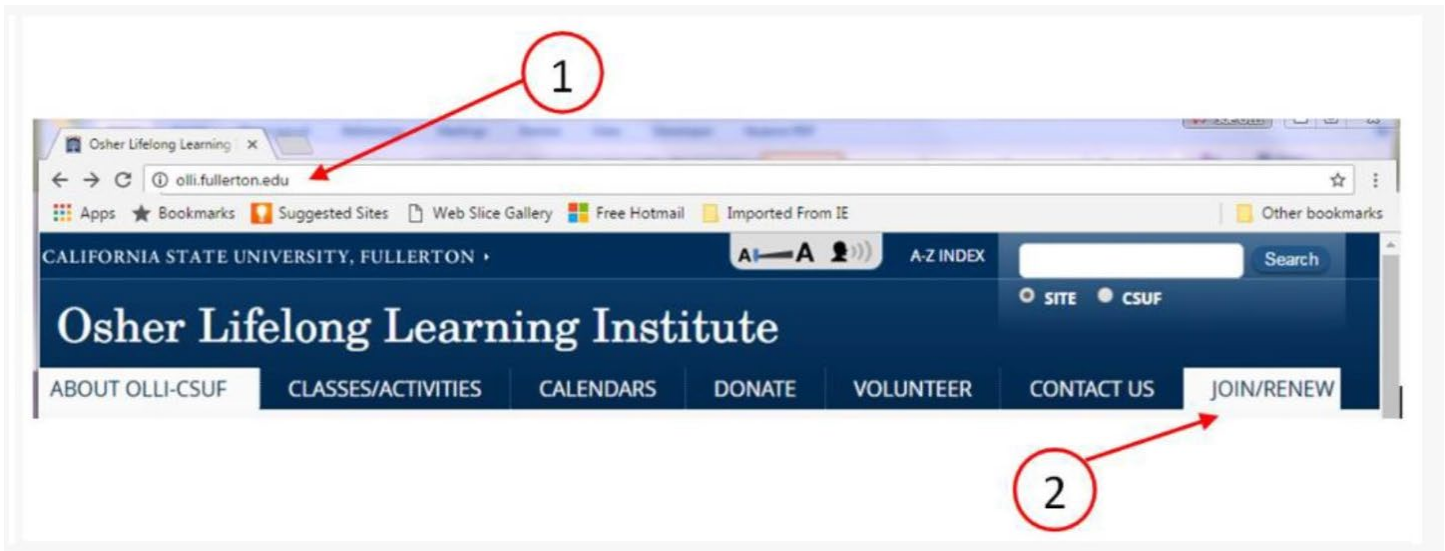


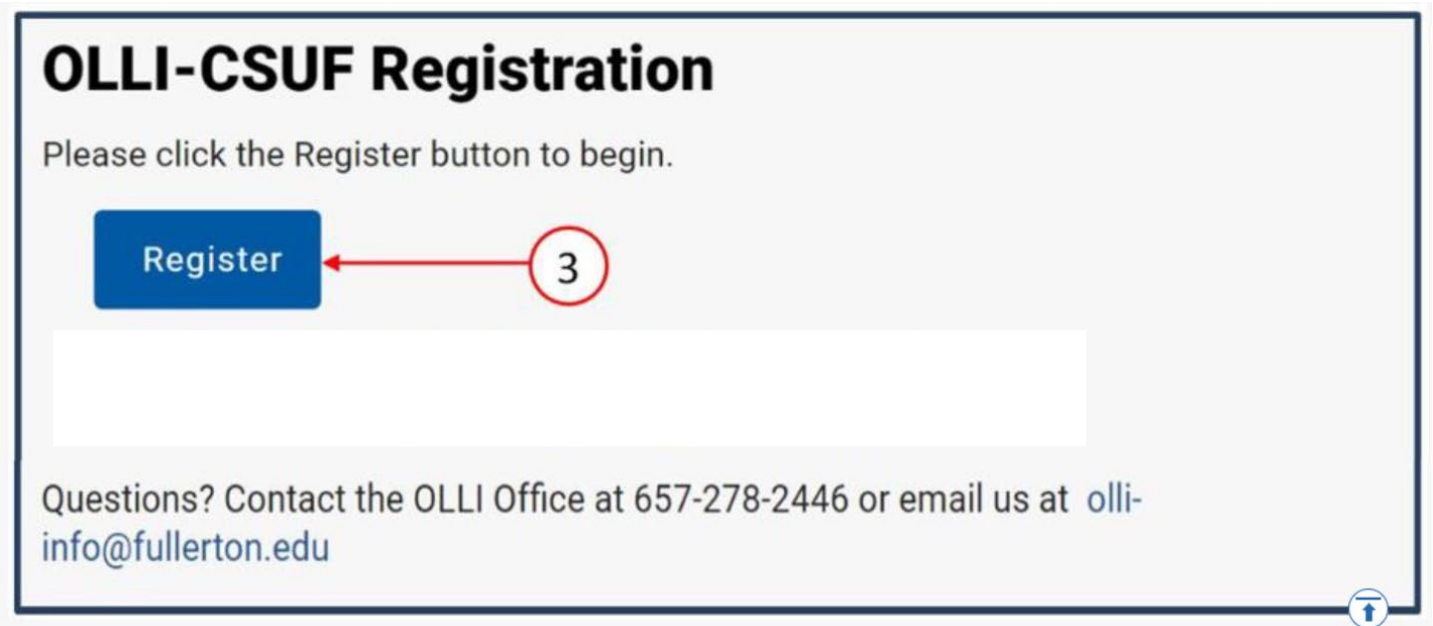
How to sign up online as a new/renewing OLLI member

Before you start, make sure you have your payment method, emergency contact name/phone number, and your car's color, make, and license number!

1. Start up a web browser (e. g. Chrome) and enter olli.fullerton.edu into the address bar to go to the OLLI home page.
2. Click [JOIN/RENEW](#) in the navigation bar to get to the Registration page.



3. Click the blue **Register** button to start registering.





at
California
State University
Fullerton

Spring



Categories



CLASSES WITH FEES



MEMBERSHIP
REGISTRATION

Click here to Start
Registering for the
Membership



SPRING/SUMMER MEMBERSHIP REGISTRATION

Osher Lifelong Learning Institute / SPRING/SUMMER MEMBERSHIP REGISTRATION



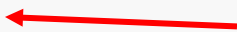
2025 Spring & Summer Membership

Price: \$160.00

PLEASE CLICK THE SHOPPING CART TO
CONTINUE..

Quantity:

Click on the Shopping Cart to Continue



4. Select 'Yes' if you have a CWID, and please enter it even though it's not mandatory. It will help with your account activation/deactivation.

NOTE: All fields with a red asterisk are required.

2025 Spring & Summer Membership

Osher Lifelong Learning Institute / SPRING/SUMMER MEMBERSHIP REGISTRATION / 2025 Spring & Summer Membership - Options

Price: \$160.00
Quantity: 1

* Indicates required information

Are you a returning/renewing member (or have had a previous affiliation to CSUF)? *

Yes

Campus Wide ID (CWID)

(9 characters maximum)

Not required, but helpful!!

5. Fill in the First Name field (with correct capitalization) and go on to the next field using Tab or by clicking the left mouse button while pointing to the field. Make the name and address look like an address label.

2025 Spring & Summer Membership

Osher Lifelong Learning Institute / SPRING/SUMMER MEMBERSHIP REGISTRATION / 2025 Spring & Summer Membership - Options

Price: \$160.00
Quantity: 1

* Indicates required information

Are you a returning/renewing member (or have had a previous affiliation to CSUF)? *

Select One

First Name

First Name *

Middle Name

Middle Name

Last Name

Last Name *

5

6. Keep filling fields in this manner. Use the scroll bar to move down the page as needed.

Preferred Name

Preferred Name

Home Street

Home Street *

Home City

Home City *

Home State

Home State *

Select a State

Home Zip

Home Zip *

Home Country

Home Country

Select a Country

Please fill out the name you would like on the name tag.

Go on to the next field using Tab or by clicking the left mouse button while pointing to the field. Use the scroll bar to move down the page as needed.

Keep filling fields in this manner.

Preferred Name

Preferred Name

Home Street

Home Street *

Home City

Home City *

Home State

Home State *

Home Zip

Home Zip *

Home Country

Home Country

Go on to the next field using Tab or by clicking the left mouse button while pointing to the field. Use the scroll bar to move down the page as needed.

Keep filling fields in this manner.

7. Please enter the birthdate in the correct format as specified.

The image shows a registration form with several fields. A red circle with the number '7' is placed over the birthdate input field, with an arrow pointing to the calendar icon. Another red circle with the number '8' is placed over the 'Do you need an OLLI Parking Pass?' dropdown menu, with an arrow pointing to it.

Email *
name@email.com
(6-70 characters)

Gender *
Select One

Home Phone (If you do not have a Home Phone, please enter your Mobile Phone) *
[Country Flag] [Input Field]

Mobile Phone (If you do not have a Mobile Phone, please enter your Home Phone number again) *
[Country Flag] [Input Field]

Birthdate (mm/dd/yyyy) * ⓘ
[Input Field] [Calendar Icon] ← **7**
Hint: Calendar keyboard shortcut ALT + DOWN (Mac OPTION + DOWN)

Ethnicity *
Select One

Parking Pass
Do you need an OLLI Parking Pass? *
Select One ← **8**

Are you interested in volunteering at OLLI? *
Select One

8. If you select 'Yes' when asked if you need a parking pass, you must enter information about the car you'll be parking.

Note: MAKE SURE TO ENTER THE INFORMATION IN THE ORDER PROVIDED (License Plate, Car Color, Car Make) and be sure to use commas as indicated.

Parking Pass

Do you need an OLLI Parking Pass? (Select "NO" if your car was registered for Fall 2024) *



Yes

Please type in order of- License Plate, Car Color, Car Make(BE SURE TO PUT COMMAS) *

(1-1,000 characters)



Are you interested in volunteering at OLLI? *

Select One

Would you like the OLLI Chronicle/Monthly Newsletter to be delivered by Mail? *

Select One

Would you like the OLLI Course Catalog/Blue Book to be delivered by Mail? *

Select One

Do you give permission for OLLI to use photos/videos of you in promotional materials or websites? *

Select One

How did you hear about OLLI that prompted you to join? *

Select One

Text urgent OLLI messages to cell phone

Select One

Go on to the next field using Tab or by clicking the left mouse button while pointing to the field. Use the scroll bar to move down the page as needed.

Keep filling fields by selecting "Yes" or "No".

9. Select Continue to move to the Review screen.

The image shows a form for entering emergency contact information. The form is titled "Emergency Name" and includes fields for "First Name *", "Last Name *", "Emergency Address" (with sub-fields for "Address Line 1", "City", "State/Province", and "Zip Code"), "Emergency Phone *" (with a country code dropdown), and "Emergency Email". A red arrow points from the "Emergency Address" label to the "Address Line 1" field. Another red arrow points from a red-bordered box containing the text "Not required, but helpful!!" to the "Emergency Email" field. At the bottom of the form, a blue bar contains a white circle with the number "9" and a red-bordered button labeled "Continue".

Emergency Name

First Name * Last Name *

Emergency Address

Address Line 1 City

State/Province Zip Code

Emergency Phone *

Emergency Email

name@email.com
(1,000 characters maximum)

9

Continue

10. Review your details and click on 'Checkout' to continue.

Item Name	Store	Quantity	Remove	Amount
2025 Spring & Summer Membership	Osher Lifelong Learning Institute	1		\$160.00

Are you a returning/renewing member (or have had a previous affiliation to CSUF)?

First Name:

Last Name:

Home Street:

Home City:

Home Zip:

Home Country:

Email:

Gender:

Home Phone (If you do not have a Home Phone, please enter your Mobile Phone):

Mobile Phone (If you do not have a Mobile Phone, please enter your Home Phone):

Would you like the chronicle to be delivered by Mail?

Would you like the Blue Book to be delivered by Mail?

Do you give permission for OLLI to use photos/videos of you in promotional materials or websites?

How did you hear about OLLI that prompted you to join?:

Text urgent OLLI messages to cell phone:

Emergency Name:

Emergency Phone:

Total: \$160.00

Promotional Code

11. Enter your email address here for confirmation, and a receipt will be sent to this email and click on “Continue” to move to the Payment Screen.

My Cart Delivery Payment Confirmation Receipt

Contact Information

Email: * * Indicates required information

Back Continue Shopping **Continue**

Payment Method

Payment Method: * * Indicates required information

Available Payment Methods

American Express Discover BCBcard VISA Mastercard

Credit Card

Credit Card Number: *

Expiration Date: * * Indicates required information

Security Code: * [View example](#)

Billing Address

Name: * * Indicates required information

Address Line 1: *

Address Line 2:

Country: * * Indicates required information

City: *

State/Province: * * Indicates required information

Postal Code: *

Back Continue Shopping **Continue**

Click on Continue to Review your order and to print.

My Cart Delivery Payment Confirmation Receipt

Review Order

Payment Information

Payment	Details	Billing Information	Summary
Visa	xxxxxxxxxxxx1111	abc abc, bbb, bbb fullerton, CA 92831 United States	2025 Spring & Summer Membership: \$160.00 Tax: \$0.00 <hr/> Total: \$160.00

[Change Payment Information](#)

Return Policy Agreement

Osher Lifelong Learning Institute
Return Policy

By checking this box you are agreeing to the above Return Policy Agreement.

[Back](#) [Print Agreement](#) [Continue Shopping](#) [Submit Order](#)

Remember to check this box before selecting submit order.

Submit order after checking the box

12. You will receive a copy of your receipt by email. To print a copy of your receipt: On the OLLI Payment Receipt page, select the **Print** button to bring up your computer's print dialog box.

Thank You!

This is your Order summary.

Confirmation email will be sent to the following address

Your email address will appear here

12

Print

Continue Shopping