

SPARK ENROLLMENT FORM

Fall 2017 — September 25 – November 3

PLEASE REGISTER BY SEPTEMBER 14, 2017

First Name: _____ Last Name: _____ Date: _____

FALL 2017 CLASSES

Membership is required to register for SPARK classes and no-fee activities.

ANNUAL MEMBERSHIP **\$40** _____

January 1, 2017 to December 31, 2017

MEMBERSHIP—For New Members only **\$20** _____

July 1, 2017 to December 31, 2017

MONDAY

American Musical Theater **\$30** _____

Women Who Transformed History **\$30** _____

TUESDAY

Western European Civilization:
Cold War and Reconstruction **\$30** _____

Kansas City Gems (all six classes) **\$25** _____

Kansas City Gems (individual classes)

The Marble Lady **\$5** _____

Freud: The Dark Years **\$5** _____

Living on the West Bank **\$5** _____

The Silk Road **\$5** _____

Veteran Voices **\$5** _____

Armenia **\$5** _____

WEDNESDAY

Western European Civilization:
Cold War and Reconstruction **\$30** _____

Charismatic Leadership & the Rule of Law **\$25** _____

Films: An Afternoon at the Movies **\$30** _____

THURSDAY

Painting the Light **\$30** _____

Visiting Sacred Spaces **\$30** _____

Nelson-Atkins Art Tours **\$30** _____

The Life of Harry S. Truman **\$30** _____

Computer Classes in Word **No Charge** _____

FRIDAY TOURS

National Archives **\$10** _____

Kansas City Art Deco **\$20** _____

TOTAL COST OF CLASSES & MEMBERSHIP _____

PARKING TAGS (one per day) # tags _____ x \$3 _____

SPARK CONTRIBUTION (tax deductible) _____

FALL PICNIC AND PREVIEW # people _____ x \$15 _____

TOTAL OF ALL ITEMS _____

MEMBERSHIP INFORMATION

Please complete registration information on the next page if you are a:

- New Member
 Member with Information Change

NO-FEE ACTIVITIES

SPARK membership is required.

- Thursday Book Group
 Margaret Sturges' Book Group
 Lunch and a Book
 Let's Eat Out

FALL PICNIC AND CLASS PREVIEW

September 7 • 11:30 am—2:00 pm
Kingswood Senior Living Community
10000 Wornall Road, Kansas City, MO

Cost: \$15 per person

Please RSVP by August 31

- Yes, I plan to attend
attending _____

DONATE TO SPARK!

Will you support SPARK with a tax-deductible contribution? Your gift helps us recognize our instructors and defray membership costs.

You can include your gift with your registration payment, and you will receive written confirmation.

Thank you!

PAYMENT

Please make checks payable to SPARK.

UMKC / SPARK
4825 Troost Avenue, Room 214D
Kansas City, MO 64110

FOR OFFICE USE ONLY

SPARK Sales Receipt # _____

Check # _____ **Cash \$** _____

MEMBERSHIP INFORMATION

- New Member
- Member with contact information change

First Name: _____ Last Name: _____

Name Tag Name Preference: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email (please print): _____

How did you learn about SPARK?

- SPARK Member
- Website
- Advertisement
- Other: _____

May we contact you about volunteering for SPARK in one of these capacities?

- | | | |
|-------------------------------|------------------------------|---|
| Class Coordinator | <input type="checkbox"/> Yes | <input type="checkbox"/> Not at this time |
| Serve on a committee | <input type="checkbox"/> Yes | <input type="checkbox"/> Not at this time |
| Help with event or activities | <input type="checkbox"/> Yes | <input type="checkbox"/> Not at this time |
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PHOTO RELEASE

We would appreciate your permission to use photographs or videos of you taken in SPARK classes or events to promote SPARK and its activities.

PERMISSION TO USE PHOTOGRAPH

I grant to SPARK (Senior Peers Actively Renewing Knowledge), its representatives and employees the right to take photographs or videos of me related to SPARK activities. I authorize SPARK, its assignees and transferees to copyright, use and publish the same in print and/or electronically. I agree that SPARK may use such photographs of me with or without my name and for any lawful purpose, including, for example, such purposes as publicity, illustration, advertising and web content. If I wish to rescind or discontinue this permission I will notify the SPARK office by email or written notice. I have read and understand the above:

Signature: _____ Date: _____

Printed Name: _____

SPARK – Senior Peers Actively Renewing Knowledge

4825 Troost Avenue · Kansas City, MO 64110

816-235-2870 · email: umkc-spark@umkc.edu · web: info.umkc.edu/spark