



**Wesleyan Academy for Lifelong Learning (WALL)
Spring 2026 Registration Form**

Name _____

Address _____

City, State & Zip _____

*Cell Phone _____ E-Mail _____

MEMBERSHIP FEES:

*Charter Member (\$135)	\$ _____
Annual Member (\$150) Spring 2026 + Fall 2026	\$ _____
Semester Member (\$80) Spring 2026	\$ _____
Single Course (\$45)	\$ _____
Optional Donation to WALL	\$ _____

Memberships are non-transferable and non-refundable

Spring 2026 Courses:

_____ Hamlet in Performance
_____ Exploring Ethics
_____ Positive Psychology
_____ Won't You Be My Neighbor, AI? Friendly Lessons for Non-Techies
_____ Forensic Anthropology Solves Human Mysteries
_____ The Arts as Hammer and Mirror: Reflection and Transformation in Culture
_____ Color ABC
_____ Tristan und Isolde
_____ Mysteries of the Night Sky
_____ Great Decisions @ Wesleyan College
_____ Great Decisions @ Carlyle Place
_____ Just Stop Talking: What to say to People in Emotional Distress
_____ A Survey of Protest in Popular Music
_____ Tour of Historic Macon
_____ Refounding Macon

Credit Card Number: (Visa, MasterCard, AMEX) _____

Expiration Date _____ CVV _____

**You can mail this form and payment to Wesleyan College–WALL Office, 4760 Forsyth Road
Macon, GA 31210.**

**If you have questions call Hannah Doan, WALL Coordinator, at 478-757-5233 or by email at
hdoan@wesleyancollege.edu**

Please sign and date the Release and Waiver of Liability (over)



WALL Release and Waiver of Liability

Read Carefully Before Signing--

I acknowledge my membership in the Wesleyan Academy for Lifelong Learning (WALL) and hereby assume all risks of bodily injury and/or property damage while I am participating in the program. I understand that, while the College takes reasonable measures to ensure personal safety and meets safety code requirements, the historic buildings and walkways can present uneven or slippery surfaces and other hazards associated with older structures.

In addition, the Georgia General Assembly recently passed SB359 in which educational institutions such as WALL are granted immunity from suits relating to COVID-19. WALL members attending class or on campus for an event assume the risk associated with such participation.

For sole consideration of Wesleyan College allowing me to participate in the WALL program, I hereby release and forever discharge Wesleyan College, WALL, and their members individually and their officers, agents, and employees from any and all claims, demands, rights and causes of actions of whatever kind that may have arisen from or be in any way connected with my participation in the program, absent gross negligence on behalf of Wesleyan College or WALL.

Additionally, I agree to receive periodic text messages from WALL regarding time-sensitive class updates, severe weather updates or Wesleyan Alerts.

I certify that I have read and understood the above.

Signature

Print Name

Date