



# Membership Application

I want to join the Zoo       Please renew my membership # \_\_\_\_\_

I want to purchase a gift (fill out recipient information below)

Member #1: \_\_\_\_\_ Member #2: \_\_\_\_\_  
(first & last name) (first & last name)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Number of children/grandchildren, **ages 3 to 20**, included on membership \_\_\_\_\_

## Choose your membership level

\$33 Individual       \$45 Couple       \$59 Family  
 \$125 Patron       \$225 Supporting       \$325 Sustaining

## Additional options

Add \$12 Plus One (*one free guest per visit*)       Save \$10 (*senior discount 62 and up*)

## Payment Options

My check is enclosed payable to **Friends of the Zoo**. Check # \_\_\_\_\_

Visa       Mastercard       Discover       American Express

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Card Holder Signature \_\_\_\_\_ **Total Enclosed \$** \_\_\_\_\_

## If Membership is a gift, please complete the following:

Gift from \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Send Membership packet to me       Send Membership packet to recipient  
 Mail renewal notice to me       Mail renewal notice to recipient

**Please allow 14 days for delivery. Mail completed application to:**

Friends of the Zoo, Membership Department  
One Conservation Place, Syracuse, NY 13204