

Membership Application Renewal

O I want to purchase a g	ift (fill out recipient informa	ation below)	
1ember #1:	irst & last name)	Member #2:	(first & last name)
Address			
City	S	tate	Zip
Daytime Phone		Home Phone	
-mail Address			
	dchildren, ages 3 to 18, ir nds Level memberships)		p (for Family, Grandparent and all
Basic Levels			
) \$42 Individual	O \$58 Dual	O \$75 Family	O \$90 Family + 1 Best Value!
Genior Levels (<i>At least</i>	one named adult must	be 62 or older)	
) \$48 Senior Dual	O \$65 Grandparent		
riends Levels			
) \$145 Patron	O \$265 Supporting		O \$375 Sustaining
Circle of Friends			
\$500 Copper	O \$1,000 Titanium		O \$2,500 Bronze
\$5,000 Silver	O \$7,500 Gold		O \$10,000 Platinum
ayment Options			
My check is enclosed p	ayable to Friends of the 2	Zoo. Check #	
Visa	O Mastercard	O Discover	O American Express
Credit Card #		Ex	xpiration Date
ard Holder Signature	Total Enclosed \$		
f membership is a gif	t, please complete the fo	ollowing:	
Gift from			
Address			
City, State, Zip			
Daytime Phone	Home Phone		
	embership packet to me		ip packet to recipient

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

O Mail renewal notice to recipient

O Mail renewal notice to me