



REGISTRATION FORM

Please fill out this form and return it along with payment to: **Greenville Zoo Education Department, 150 Cleveland Park Drive, Greenville, SC 29601.** Registration will begin on for Zoo **members July 23rd** and on July 30th for **non-members.** **(All registration is Mail-In Only.)** A 50% refund will be given if written cancellation is made three weeks before scheduled program. There is a \$10 rescheduling fee to change classes.

Child's Personal Information:		
Name:		
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date: / /	Age:
Mailing Address:		
City:	State:City:	Zip Code:
Parent / Legal Guardian:		
Cell Phone:	Home Phone:	Other:
Email Address:		
Member ID: (Number can be found under the bar code on membership card)	<input type="checkbox"/> Non-Member	

Child's Medical Information
Allergies or Medical Concerns: (For severe allergies that require an Epi-Pen - Please include an ALLERGY ACTION PLAN from doctor to instructor.)
Any Special Needs:
Emergency Contact: (In case Parent / Guardian can not be reached)
Phone Number:

Pick-Up Information
Please indicate who is authorized to pick up your child from classes. For safety reasons, a photo ID is required for pick-up.
Name:
Name:
Name:

Class Preferences <small>(Please indicate first, second and third choice for each programming.)</small>	
<p>Zoo Tots</p> <p>Fan of the Orangutan</p> <p>August 21 _____</p> <p>August 25 _____</p> <p>August 28 _____</p> <p>Bird Bonanza</p> <p>September 4 _____</p> <p>September 18 _____</p> <p>September 22 _____</p>	<p>Saturday Safari</p> <p>Wildlife Basics</p> <p>September 25 _____</p>

Pricing Reminder:
Zoo Tots: Members \$15 / Non-Members \$25 Saturday Safaris: Members \$15 / Non-Members \$25
<input type="checkbox"/> Check (Please provide driver's license state and number) _____ <input type="checkbox"/> Visa or Mastercard - Expiration Date _____ <div style="border: 1px solid black; width: 100%; height: 20px; margin: 5px 0;"></div>
Total Amount \$ _____

I hereby authorize the Greenville Zoo to take any steps necessary to insure my child's health in case of an emergency and understand that the Greenville Zoo is not responsible for any liability arising out of participation in their programs or outings. I also authorize the Greenville Zoo to use my child's name and/or photograph for education and public relations purposes related to the Zoo.

Signed _____

Date _____