

Chahinkapa Zoo

2020 Membership Application

Please help support Chahinkapa Zoo by purchasing a Zoo Friend Membership. Chahinkapa Zoo is a non-profit organization that relies on the support of members like you. Your membership purchase helps pay for the animal food, animal enrichment, habitat/exhibit improvements & upkeep, education, maintenance, employee labor, and much much more! Again, we thank you.



Today's Date: _____ **Phone Number (This is your Member Number): _____

****You will not receive a card unless you provide a phone number. ****

If you are renewing your 2019 season membership, we will send you a sticker to place on your current card for use in the 2020 season.

New 2020 cards are \$5 per card in addition to membership cost.



Membership Categories & Pricing

Zooper Membership

Receive 5 complimentary Carousel Rides

_____ **\$55 Individual** -1 Adult.

_____ **\$75 Zoo for Two** -Two adults on membership card **OR** one adult and one child **under the age of 18** living in the same household.

_____ **\$95 Family** -Up to two adults named on membership card and their dependent children **under the age of 18** living in the same household.

_____ **\$95 Grandparent** -Up to two adults living in the same household named on membership card and any grandchildren **under the age of 18**.

_____ **\$125 Babysitter** -Two adults named on membership card and their babysitters name along with the dependent children **under the age of 18** living in the same household with adults.

Name of babysitter (first & last): _____

☐ I need _____ extra card(s) (\$5 each)

****Lost membership cards are \$5 to replace****

Membership & Photo ID is required for entry into the zoo EVERY VISIT

1st Adult (First & Last Name): _____

2nd Adult (First & Last Name): _____

Number of children/ grandchildren (**Under 18 years old**): _____

Address: _____

City: _____

State: _____ Zip Code: _____

Email (ZooNooz - Help us save a stamp!): _____

****This is a gift: Purchasers Name:** _____

Purchasers Phone #: _____

(Please complete the above form with the person's information that you are purchasing the membership for)

If you would like the membership mailed to you so you may give it as a gift please give us the address you would like it mailed to.

Address: _____

City: _____

State: _____ Zip Code: _____

Benefits of being a Chahinkapa Zoo Member include:



Free Admission to the Chahinkapa Zoo



10% Discount in the Gift Shop



Discount on Zoo Education Classes



Tax Deductable Gifts



Pride in maintaining a clean and green zoo



Quarterly ZooNooz



Invitation to the Annual Zoo Friends Picnic



Carousel Tickets



Reciprocity to many zoos nationwide



\$150 Enhanced Family/Grandparent Membership

Individual, Family, or Grandparent PLUS 1 GUEST

_____ Individual _____ Family _____ Grandparent

*Receive 10 complimentary Carousel ride tickets

*Members may bring 1 additional guest free of charge each time they visit the Chahinkapa Zoo. At least one adult on the membership MUST accompany guests.



\$250 Bronze Donor Membership

Individual, Family, or Grandparent PLUS 2 GUESTS

_____ Individual _____ Family _____ Grandparent

*Receive 15 complimentary Carousel ride tickets

*Members may bring 2 additional guests free of charge each time they visit the Chahinkapa Zoo. At least one adult on the membership MUST accompany guests.



\$500 Silver Patron Membership

Individual, Family, or Grandparent PLUS 3 GUESTS

_____ Individual _____ Family _____ Grandparent

*Receive 20 complimentary Carousel ride tickets

*Members may bring 3 additional guests free of charge each time they visit the Chahinkapa Zoo. At least one adult on the membership MUST accompany guests.



\$1000 Director's Gold Membership

Individual, Family, or Grandparent PLUS 5 GUESTS

_____ Individual _____ Family _____ Grandparent

*Receive 22 complimentary Carousel ride tickets

*Members may bring 5 additional guests free of charge each time they visit the Chahinkapa Zoo. At least one adult on the membership MUST accompany guests.

*Receive a Behind the Scenes Tour with the Director and Curator for 8 people.

****Memberships are valid to December 31st****

Due to close proximity we do not reciprocate with the Red River Zoo in Fargo, ND

Payment Information

****If you wish to receive extra membership cards please add \$5 per extra card to your total****

Credit Card # _____ Check _____ Visa _____ MasterCard _____ Discover _____ American Express _____

Expiration Date _____ CVC Code _____ Credit Card Zip Code _____

Signature _____ Today's Date _____

OFFICE USE ONLY -Please do not write in this space

CC _____ Cash _____ CHECK # _____ Amount \$ _____ Date received _____
Processed Y _____ N _____ Date Processed _____ Initials _____