

Program Source: News Ad ___ Flyer ___ Friends ___ Toucan Talk ___ Other ___

Zoological Society of Florida - Miami Metrozoo Program Registration Form

Please fill out complete form

*Full Name of Child(ren): _____ Age _____
_____ Age _____

*Parent/Guardian's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Additional Phone: _____

ZSF Membership #: _____ Exp. Date: _____ Not a member: _____

Send confirmation to:

E-MAIL: _____ Fax: _____

Pre-registration with payment is required.

For information call 305-255-5551. Mail registration form with payment to Zoological Society of Florida, Education Department @ 12400 SW 152nd Street, Miami, FL 33177-1499.
OR - fax to 305-255-7126 Sorry no credit or refunds

WAIVER: I, _____, parent/legal guardian of the child give permission for her/him to participate in the Zoological Society of Florida (ZSF) Member's program. Neither the ZSF nor Miami Metrozoo (MMZ), Miami-Dade County (MDC) or their employees will be liable for any child for injury or damage to any person or property arising out of the use of MMZ facilities during Camp. All children and chaperones agree to waive any and all claims against the ZSF, MMZ waive any and all claims against the ZSF, MMZ, MDC or employees arising from child's participation in this program and presence at Miami Metrozoo.

I authorize the use and reproduction of any and all photographs and likenesses of my child for any public relations purposes. I have read the registration and have supplied accurate information and I can be reached at the numbers listed above. I authorize ZSF to transport and/or obtain medical services for my child. Parent signature is required for child to attend.

Date: _____

Signature of Parent/Guardian: _____



MEMBER PROGRAMS FOR CHILDREN

Ages 5-8 years

(check program you are enrolling in)



Strictly for the Birds

Date: Saturday, April 17th, 2010

Time: 9:30 AM - 11:30 AM

Cost: \$12 per child for members

\$15 per child for non-members



Let's Bug!

Date: Sunday, May 2, 2010

Time: 10:00 AM - 12:00 PM

Cost: \$10 per child for members

\$12 per child for non-members

person(s) attending _____.

Total Amount Due: \$ _____.

Pre-registration is required.

Program does not include Zoo admission.

Payment Information

Date Paid: _____

Amount Paid: _____

Check #: _____

Credit: Visa _____ MC: _____ Discover: _____ Amex: _____

Credit Card #: _____

Expiration Date: _____

For office use: Date processed: _____

Authorization: _____

Confirmation: _____