

Individual Annual Pass Application Form

PLEASE PRINT CLEARLY

MEMBERSHIP TYPES (Price equivalent to less than 4 visits a year)

ADULT PASS \$ 85.50

CHILDS DOB required:

CHILD PASS (aged 3 to 15 years) \$ 39.50

CHILDS DOB required:

CHILD FLEXIPASS \$125.00
(One NAMED CHILD - MAX AGE 15 - plus any adult)

STUDENT (16 years and over with ID) \$ 62.50

SENIOR (aged 65 years and over with ID) \$ 62.50

COMMUNITY SERVICES CARD (with ID) \$ 62.50

NAME:	LAST NAME:
PHONE:	
CITY:	
If you would like to receive email reminders of pass expiry, and news relating to membership please record your email below.	
EMAIL:	

** Also ask us about paid membership to the Friends of the Zoo charitable trust (with added benefit of 10% off your Zoo annual pass)*

CONDITIONS OF USE

- This Annual Pass is a personal membership for the people listed above.
- Annual Passes are not transferable to other people or refundable.
- ID photos will be taken and attached to your membership. These photos will be electronically stored at Hamilton Zoo Reception.
- This Annual Pass expires 12 months from the date of purchase.
- Card must be presented on entry to receive card benefits.
- The Annual pass is valid for admission to Zoo only. Prices valid for 2023/24 financial year.
- A \$5.00 fee will be charged for all replacement cards issued.

ACCEPTANCE SIGNATURE of Main Pass Holder:

OFFICE USE ONLY

Date of purchase: Pass No: Operator:

Date renewed on:

VISITED DATA ENTERED

Family Annual Pass Application Form – PLEASE PRINT CLEARLY

PRICE: \$249 - Price equivalent to less than 4 visits a year

CHILDREN ON FAMILY PASS AGED 3-15 YEARS OLD

Please only write children on the form who are in this age bracket (under 3 years are no charge)

	1st Adult – NAME:	LAST NAME:
	2nd Adult – NAME:	LAST NAME:
DOB required:	1st Child – NAME:	LAST NAME:
DOB required:	2nd Child – NAME:	LAST NAME:
DOB required:	3rd Child – NAME:	LAST NAME:
DOB required:	4th Child – NAME:	LAST NAME:
Phone:		
CITY:		
<i>If you would like to receive email reminders of pass expiry, and news relating to membership please record your email below.</i>		
Email:		

* Also ask us about paid membership to the Friends of the Zoo charitable trust (with added benefit of 10% off your Zoo annual pass)

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ACCEPTANCE SIGNATURE of Main Pass Holder:

OFFICE USE ONLY

Date of purchase: *Pass No:* *Operator:*

Date renewed on::

VISITED **DATA ENTERED**