

# Gift Membership Application



Santa Barbara Zoo Membership Department  
500 Niños Dr. Santa Barbara, CA 93103  
Phone: 805-962-5339 Fax: 805-962-1673

## Gift Membership is for:

### Categories/Prices

<input type="checkbox"/> Individual \$65	<input type="checkbox"/> Family Plus \$140	<input type="checkbox"/> Curator's Circle \$1,500
<input type="checkbox"/> Individual Plus \$80	<input type="checkbox"/> Supporting \$175	<input type="checkbox"/> Benefactor's Circle \$2,500
<input type="checkbox"/> Dual \$80	<input type="checkbox"/> Zoological Society \$350	<input type="checkbox"/> Executive Circle \$5,000
<input type="checkbox"/> Dual Plus \$95	<input type="checkbox"/> Society Deluxe \$500	<input type="checkbox"/> Director's Circle \$10,000
<input type="checkbox"/> Family \$110	<input type="checkbox"/> Keeper's Circle \$1,000	

### Adult 1:

Last: \_\_\_\_\_ First: \_\_\_\_\_

### Adult 2:

Last: \_\_\_\_\_ First: \_\_\_\_\_

### Names of dependent children or grandchildren under 18:

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Email: \_\_\_\_\_

Gift is from (Name) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

Email: \_\_\_\_\_

I have enclosed an extra \$ \_\_\_\_\_ for the Santa Barbara Zoo's Local Conservation Programs.

### Payment Method:

Check enclosed, payable to the Santa Barbara Zoo

AMEX  Discover  MC  Visa

Account # \_\_\_\_\_ CVV \_\_\_\_\_ Exp. Date \_\_\_\_\_

Amount \$ \_\_\_\_\_ Signature \_\_\_\_\_

Please send gift to recipient.  Please send gift to me. I will deliver it personally.

Please send gift in gift certificate form.

Membership will be mailed to the specified address in approximately two (2) to three (3) weeks.

All Memberships are non-transferable.