



## Membership Application

To get a Foster Care or Care Facility membership, fill out the application below and send to [guestservices@wildlifesafari.net](mailto:guestservices@wildlifesafari.net) along with the other required documents listed. You will receive an email or phone call to finalize.

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

Contact Preference:  Email  Phone

### **Foster Care:**

1<sup>st</sup> Named Adult (MUST match ID): \_\_\_\_\_

2<sup>nd</sup> Named Adult (MUST match ID): \_\_\_\_\_

### **Care Facility:**

Contact Name (Must be Facility Staff): \_\_\_\_\_

Facility Name: \_\_\_\_\_

### **Membership Packages:**

Check which one you are applying for.

All Memberships are good for 1 year and include free train rides, 10% off camel rides, and free and discounted rates at reciprocal zoos.

**\*Must show matching ID or proof of employment with membership card to drive thru.**

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|---|---|
| <input type="checkbox"/> <b><u>Foster Care Membership: \$115.00</u></b><br><b>2 named people on license and 8 children</b><br>*Must show Foster License or Proof of Placement   | <input type="checkbox"/> <b><u>Additional Cardholder:</u></b><br><b>\$55.00 each</b><br>How Many? _____ |
| <input type="checkbox"/> <b><u>Care Facility Membership: \$50.00</u></b><br><b>2 cards with facility name</b><br>\$25.00 Adults _____ \$15.00 Kids _____<br>Payment is for clients, staff and caregivers at facility are free<br>*Must show Business Verification | <input type="checkbox"/> <b><u>Additional Guest:</u></b><br><b>\$35.00 each</b><br>How Many? _____      |

\*Examples of Business Verification:

- Care facility license, employee business card, business name tag or badge, pay stub, or link to website