

# MINNESOTA ZOO MEMBER

Name \_\_\_\_\_

Second Adult (if applicable) \_\_\_\_\_

\_\_\_\_ Number of dependent children age 21 and under OR

\_\_\_\_ Number of grandchildren age 21 and under

Address \_\_\_\_\_

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

Daytime Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Checks payable to Minnesota Zoo, 13000 Zoo Boulevard, Apple Valley, MN

**PLEASE LIST CHILDREN COVERED BY YOUR MEMBERSHIP.  
(HOUSEHOLD & HOUSEHOLD PLUS)**

First Name	Last Name	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**NEW MEMBER**  **RENEWAL**

Membership Number \_\_\_\_\_

**\$65 Individual**

One member.

**\$119 Individual Plus**

One member plus one free guest.\*

**\$119 Dual**

Two members at same address.

**\$155 Household**

One or two adult members at same address and their dependent children age 21 and under.

**\$179 Household Plus**

Same as Household, plus one free guest each visit.\*

**\$155 Grandparent**

One or two adult members at same address and their grandchildren age 21 and under.\*\*

**\$179 Grandparent Plus**

Same as Grandparent, plus one free guest each visit.\* \*\*

**\$250 Friends Plus**

Same as Household membership plus two free guests each visit and additional Friends benefits.\* \*\*



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\* Guest(s) must be accompanied by the adult/child member.  
\*\* Grandchildren must be accompanied by the named cardholder.  
Prices and benefits are subject to change without notice.