



# ross park ZOO

## Become a Member of the Ross Park Zoo

For questions regarding membership please  
call (607) 724-5461 ext.502

**Limited Time Promotion: Get a free 4-cup grain punch card  
when you purchase your membership by April 30, 2024!**

Membership Packages	Regular Price		Senior/Student/ Military Price	
	1 year	2 years	1 year	2 years
Individual	\$50	\$90	\$45	\$80
Family	\$75	\$140	\$70	\$130
Family & Friends	\$100	\$190	\$95	\$180

### Membership Packages:

Individual: Free admission for named adult (18+) on membership

Family: Free admission for (2) named adults\* and their children/grandchildren under 18

Family & Friends: Free admission for (2) named adults\*, their children/grandchildren under 18, AND (2) additional guests

\*All named adults must be in the same household

### Optional Add Ons:

- Include extra card for \$5
- Add another adult/caregiver to your 1-Year Family or Family & Friends Membership for \$20; \$40 for 2 years.

### Membership Benefits:

- Access to member only events
- Discounts on special events & programs
- 10% discount in our Gift Shop
- Bridge Connection: \$2 off regular admission at Discovery Center, Kopernik Observatory, Phelps Mansion Museum, & Roberson Museum and Science Center
- Free or reduced admission to participating zoos, aquariums, & botanical gardens (visit [rossparkzoo.org](http://rossparkzoo.org) for current list)

### STEP 1:

Please circle the membership you want above and write the total of your purchase below plus any add ons.

Membership Price: \_\_\_\_\_

Additional Cards (\$5 each): \_\_\_\_\_

Additional Adults/Caregivers: \_\_\_\_\_  
\$20 per person for 1 year or \$40 per person for 2 years

Additional Donation: \_\_\_\_\_

Total Amount: \_\_\_\_\_

### STEP 2:

Purchaser's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

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

Name(s) on Card: 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

Please include the first and last name for all adults to included as named on the card

Mail Membership Card to: ☐ Purchaser ☐ Gift Recipient

**Is this a gift for someone else?** ☐ Yes ☐ No  
(if yes, complete below)

Gift Recipient Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

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

### If Mailing:

Please mail completed form with payment to:

Ross Park Zoo  
Attn: Membership  
185 Park Avenue  
Binghamton, NY 13903

☐ Check Enclosed Payable to Ross Park Zoo

\*Please allow 2 weeks for processing & delivery\*

### Staff Complete

Date & Amount Paid: \_\_\_\_\_

Method: Square / Neon / Check

Punch Card Given? Yes / No    Membership Card Given? Yes / No

Staff Member: \_\_\_\_\_