

Abilene Zoological Society

Group Rate Request For:

(Non Profit Educational Groups;
Community Service Clubs; Civic
Organizations; Church Groups; or
Large Party Groups of 10 or more)

Name of Group _____

Name of Sponsor _____

Mailing Address _____

City, State, Zip _____

Phone _____

I certify that we are a bonafide group, and will abide by the
rules and regulations of the Abilene Zoological Society.

Adults Present _____ X \$5.00 each = _____
(age 13-59)

Seniors Present _____ X \$4.50 each = _____
(age 60+)

Children Present _____ X \$3.50 each = _____

Total= _____

You must have 10 or more paying to get the group rate. Please present the TOTAL amount in ONE payment to the ticket sales person with this request. Thank you for thinking of the zoo. We appreciate you presence and cooperation. Rates and prices subject to change without notice.

Please check to see if anyone in your group has family memberships or guest passes. This will be a separate count, and not part of the paying group.

Signature _____

Date _____