



DATE: _____

FAMILY MEMBERSHIP 2011

Type of Membership:

_____ Patron (4) \$500 _____ Giving (4) \$250 _____ Unlimited (4) \$130
_____ Limited-12 visits (4) \$100 _____ Limited-6 visits (2) \$60 _____ Bear Cub Club Only (2) \$70

Last Name on Membership _____

Adult First Name: Mr. Mrs. Ms. _____

Add'l. adult Mr. Mrs. Ms. _____ (Relationship to member) _____

Add'l. adult Mr. Mrs. Ms. _____ (Relationship to member) _____

Child (first/last) _____ M F (circle one) Year of birth _____

Child _____ M F Year of birth _____

Child _____ M F Year of birth _____

Child _____ M F Year of birth _____

Home Address: _____

City: _____ State: _____ Zip: _____

County/Parish: _____ Home Phone: _____ Cell: _____

Primary Email address: _____

Primary Employer: _____ Phone: _____

\$25 for each additional person \$50 per family for Bear Cub Club Membership
(Program now offered year round!)

**Membership is non-refundable and is not valid for group visits.
Duplicate and replacement cards will not be issued.**

FOR OFFICE USE ONLY

of persons on card _____ Amt. Paid _____

Form of payment: Cash _____ Check _____ VI/MC _____