



Animal Adoption Application

Purchaser Information:

Today's Date: _____

Name: _____

Organization (if Applicable): _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____

Recipient Information:

Name: _____

Organization (if Applicable): _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____

Name to appear on Honorary Zookeeper Certificate:

Animal to be Adopted: _____

If this is a gift, what is the occasion? _____

How would you like the card signed? _____

Level of Adoption:

\$35 \$50 \$100 \$250 \$500 \$1,000

\$75 Quarterly Featured Animal

Check this box to allow your full donation to go to the care and feeding of the animals. If you choose this option, you will opt out of receiving thank-you gifts and will receive only a letter of appreciation.

Method of Payment:

Check enclosed payable to Jacksonville Zoo and Gardens

VISA

MC

DIS

AMEX

Credit Card # _____

Exp. _____ CVV # (3 digit number on back of card) _____

Authorized Signature: _____

PLEASE ALLOW 2-3 WEEKS FOR PROCESSING.
Jacksonville Zoo and Gardens, Attn: Adopt-an-Animal Coordinator
370 Zoo Parkway, Jacksonville, FL 32218
Phone: (904) 757-4463, ext. 145 Fax: (904) 757-4315
This donation is tax deductible and is valid for a period of one year.