

Jacksonville Zoo and Gardens

2009 Fall Early Childhood Education Programs Registration Form

Only one student per registration form

Advance registration is required and full payment must accompany registration form.

Registration deadline is 5 p.m. the Thursday before scheduled class date.

Child's Name: _____ Age: _____ Parent's Name: _____

Address: _____ City: _____

State: _____ ZIP: _____ Daytime Phone: _____ Cell/Evening Phone: _____

E-Mail Address: _____ Please add child to waiting list using the e-mail address listed

Jacksonville Zoo Member: Yes _____ - Member #: _____ No _____

Please circle the date(s) of the desired program(s) below:

<p style="text-align: center;">Zoo Tots 10:00 AM Preschoolers 3 to 5 year olds</p> <p style="text-align: center;">Sept. 15 or 17 Sept. 22 or 24 Sept. 29 or Oct. 1 Oct. 6 or 8 Oct. 13 or 15 Oct. 20 or 22 Oct. 27 or 29 Nov. 3 or 5 Nov. 10 or 12 Nov. 17 or 19</p>	<p style="text-align: center;">Kiddy Paws 11:00 AM Toddlers 9 - 35 months old</p> <p style="text-align: center;">Sept. 15 or 17 Sept. 22 or 24 Sept. 29 or Oct. 1 Oct. 6 or 8 Oct. 13 or 15 Oct. 20 or 22 Oct. 27 or 29 Nov. 3 or 5 Nov. 10 or 12 Nov. 17 or 19</p>	<p>List any allergies, medical conditions, dietary restrictions, and special needs. Special needs/Accessibility needs arrangements must be made prior to registration. I authorize emergency medical treatment for my child. I also agree to allow the Jacksonville Zoo and Gardens to use pictures/photos of my child for promotional and news purposes. Signature: _____ (Your signature is required for your child to attend classes)</p>
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Program Fee: Zoo Members # of classes _____ x \$10 each = \$ _____
 Non-members # of classes _____ x \$13 each = \$ _____ TOTAL FEE ENCLOSED \$ _____

Or, please charge my: () Visa () MasterCard () Amex () DiscoverCard # _____

Expiration date: _____ V-Code: _____ Signature of cardholder: _____

(Last 3 or 4 digit code from the back of the card)

Print your name as it appears on the card: _____

Please mail form to: Jacksonville Zoo and Gardens, Education Department, 370 Zoo Parkway, Jacksonville, FL 32218
 FAX form to 904-757-2444 or hand deliver form to the PepsiCo Foundation Education Campus