

LINTON ZOOLOGICAL GARDENS

SEASON TICKET RENEWAL FORM 2017

To

THANK YOU FOR YOUR SUPPORT BY PURCHASING YOUR SEASON TICKET WITH US FOR THE PAST YEAR.

YOUR CURRENT TICKET EXPIRES ON _____

If you would like to have another year of unlimited admission (Winter Weekend dates apply) and newsletters during the year please fill in the application form below and sent it to:

Kim Simmons, Linton Zoo, Hadstock Road, Linton, Cambridge, CB21 4NT.

Please enclose your cheque made payable to LINTON ZOO.

Please tick category required:

1 ADULT £35 _____

2 Adults (purchased together and living at the same address) £65 _____

1 CHILD £25 _____
(Age 2-13)

1 OAP £30 _____

2 OAPs (purchased together and living at the same address) £55 _____

FAMILY TICKET £100 _____

(2 Adults and 2 Children or 1 Adult and 3 Children)

DATE YOU WISH TO START YOUR UNLIMITED VISITS FROM _____

Please complete form below and include dates of birth of children. *Delete as appropriate

NAME ADULT/OAP/CHILD*

NAME ADULT/OAP/CHILD*

NAME ADULT/OAP/CHILD*

NAME ADULT/OAP/CHILD*

NAME ADULT/OAP/CHILD*

ADDRESS (including postcode)

EMAIL ADDRESS.....

TEL. NO. SIGNED

YOUR TICKETS WILL BE READY FOR COLLECTION ON YOUR NEXT VISIT

FOR OFFICE USE ONLY	Staff Member initial _____	Date of Purchase _____
Payment Method: Cash _____	Card _____	Cheque _____ Total _____

