Saint Louis Zoo
Animals Always®

ZooQuest for Adults
Team Registration Form

REGISTRATION POLICIES: Registrations close two weeks prior to the program date or when the program is sold out. Registration forms can be mailed to the address below or dropped off at the Education Department, Monday-Friday, 8 a.m.-5:p.m. (no facsimiles, email, or phone registrations accepted). **TEAM INFORMATION:** Teams must consist of at least two, but no more than four members over the age of 18. When you register, the names, birthdates, emergency contact information for each team member must be provided. Each team member must sign the Terms & Conditions section for themselves. **PARKING:** Options include the Zoo's parking lots for a fee (Zoo Members can use their parking benefits) or free street parking throughout Forest Park. **PAYMENT:** Complete payment is required at the time of registration. Credit cards and checks are accepted. For those programs that are sold out, checks will be returned. Please note: A deposited check does not guarantee that you have been enrolled in the program or that your registration is complete. **CANCELLATIONS:** A refund less an $8 processing fee will be issued if your entire team cancels at least two weeks prior to the day of the program. We are unable to give any refunds after the two-week deadline. We reserve the right to cancel the program due to low enrollment (full refund will be issued). **CONFIRMATIONS:** After your registration is processed, a Registration Report will be sent to the email address provided unless you indicate you would like it to be mailed. For more information, please call (314) 646-4544, #6.

ZooQuest for Adults Team Information

Team Name (optional)

☐ I am a Zoo Member and can take advantage of the discounted registration fee. Member number _____ Level _____ Exp Date _____

Required	Team Leader	Name		Birth Date	
		Address	City	State	Zip
		Home Phone	Work Phone	Cell Phone	
		E-Mail		☐ Please mail Registration Report	
		Your e-mail address may be used to send you information about your Saint Louis Zoo education program. Please check here_____ if you would also like to receive occasional e-mail updates, news and information about other Zoo opportunities. We will not sell, trade, or exchange your e-mail address with any third parties.			
		Emergency Contact Name & Phone Number			
	Team Member #2	Name		Birth Date	
		E-mail		Phone	
		Emergency Contact Name & Phone Number			
Team Member #3		Name		Birth Date	
		E-mail		Phone	
		Emergency Contact Name & Phone Number			
Team Member #4		Name		Birth Date	
		E-mail		Phone	
		Emergency Contact Name & Phone Number			

Terms & Conditions

Each team member is required to sign for themselves.

CLAIMS RELEASE

I recognize and acknowledge the risk existing as participant(s) in a Saint Louis Zoo program or activity. I fully and unconditionally release the Saint Louis Zoo, all associates and/or assigns from any and all claims for personal injury and/or property damage. I voluntarily declare this release to be my full acknowledgement to relinquish all rights for any and all injury and/or property damage resulting from participation in Zoo programs or activities. Photos taken by the Saint Louis Zoo staff during any program or activity are property of the Zoo and may be used for public relations purposes related to the Zoo.

Team Leader	Signature	Date
Team Member #2	Signature	Date
Team Member #3	Signature	Date
Team Member #4	Signature	Date

Payment - Fee per Team

Check one: ☐ $45 Zoo Members ☐ $50 General Public

CHECK – Payable to "Saint Louis Zoo Ed Dept" – A fee will be charged for returned checks.

CREDIT CARD ☐ VISA ☐ MasterCard ☐ Discover ☐ American Express

Cardholder Name: _____ Signature: _____

Billing Street _____ City _____ State _____ Zip _____

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Account Number _____ Expiration Date _____

Mail to: Saint Louis Zoo
Attn: Finance Dept
One Government Drive
St. Louis, MO 63110