

Zoos Victoria Teacher Membership Application Form

Your details This is an editable document

<input type="checkbox"/> Early years teacher	<input type="checkbox"/> Primary teacher	<input type="checkbox"/> Secondary teacher	<input type="checkbox"/> Tertiary teacher	<input type="checkbox"/> Student	<input type="checkbox"/> Other _____ <small>(please specify)</small>
Mr/Mrs/Miss/Ms/Other _____	First name	Family name			
VIT Registration No.*		Date of birth			
School / Institution name					
Postal address					
Suburb		State	Postcode		
Telephone (BH)		(Mobile)			
Email					

I agree to be bound by the Zoos Victoria membership conditions which may be altered from time to time and understand all contact information will be used for the purpose of providing information related to my membership, Zoo news and events. You can view our privacy statement at zoo.org.au/privacy

Signature	Date
-----------	------

We allow digital signatures

Please tick this box if you DO NOT wish to receive information from Zoos Victoria via email or post.

Payment

Payment accepted by credit card only. VIT cardholders can pay in person at one of our three Zoos.

Debit my credit card: Mastercard Visa Amex

Card number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Expiry date:

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
----------------------	----------------------	---	----------------------	----------------------

Name on card

<input type="text"/>

Cardholder signature

We allow digital signatures

Annual membership	\$72
Optional donation*	\$
TOTAL	\$

*Your membership helps us to fight wildlife extinction. If you would like to add a donation to help us further, enter the amount in the box above, thank you. Donations over \$2 are tax deductible.

Conditions of membership

Teacher memberships are available to teachers and individuals in approved education related roles or study. Memberships are valid for 12 months, are not transferable and non-refundable. Only the person named on the card may use it. Your current financial year membership card must be presented to gain entry. Additional adults and children cannot be added. No further discounts apply. Proof of current teacher registration or enrollment status may be required to gain entry. Photocopies of this form are acceptable. The price is valid until the 30th of June 2020. For full terms and conditions visit zoo.org.au/teacher-members

For more information

Tel (03) 9340 2788
Email members@zoo.org.au
zoo.org.au/teacher-members

Return completed form

Email to members@zoo.org.au
OR
Post completed application form and proof of current teacher registration or enrolment status to:
Zoos Victoria Memberships
PO Box 74, Parkville VIC 3052

ZOOS
VICTORIA
MEMBERSHIP