



Adult Participants (Family 0	Camp only):
Phone number:	Email:
	ZooCamp Selection
1. Camp Name:	1. Camp Date:
2. Camp Name:	2. Camp Date:
3. Camp Name:	3. Camp Date:
4. Camp Name:	4. Camp Date:
	T-Shirts
Size	es: Child S, M & L Adult S, M, L, XL & XXL
	Additional T-shirt \$10

T-shirt size selection: _____ T-shirt quantity: _____

Card #: _____ Name on Card:_____

Payment

CVV: _____ Exp. Date: ____ Total Amount: \$ _____

Mail form(s) to:

Signature: ___

Please select your payment method: Check

Akron Zoo Attn: ZooCamp 500 Edgewood Ave. Akron, OH 44307

Visa MasterCard

Discover