

Purchase Date _____ Sold By _____ Expiration is the end of this month the following year.



4320 S. Oxbow Avenue, Sioux Falls, SD 57106

NEW
 RENEWAL

MEMBERSHIP APPLICATION

Please use this form, fill in the information and mail with your payment to the address above. This is a one-year time frame which includes unlimited admission, quarterly newsletter and member discounts. Expiration date is the last day of the month the following year.

Name(s) _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

Youth ages 4 – 18 years (include names and birth dates)

Name: _____ DOB: _____
Name: _____ DOB: _____
Name: _____ DOB: _____
Name: _____ DOB: _____

Children ages 3 and under (include names and birth dates)

Name: _____ DOB: _____
Name: _____ DOB: _____

Give a Membership as a GIFT!
Purchaser's Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Email _____

Membership Information:

- Individual Membership \$32.08
- Individual Plus(1 free guest per visit) \$53.46
- Student (must have a student ID) \$21.38
- Grandparent Membership (6 children under 18 + 2 passes) \$74.84
- Regular Membership (2 adults) \$48.11
- Family Membership (2 adults & 6 children under 18) \$69.50
- Family Plus(family + 2 guests who will receive 10% off in gift shop during the visit) \$149.69

Prices include 6.92% SD Sales Tax.

Payment Method:

- Check enclosed
- Charge to my Visa/MasterCard/Discover

_____ - _____ - _____ Exp. Date ____/____

Signature _____