



**LINTON ZOO CONSERVATION PARK**

Cambridgeshire's Wildlife Breeding Centre  
Hadstock Road, Linton, Cambridgeshire, CB21 4NT

Tel: 01223 891308

Email: lintonzoo@hotmail.co.uk www.lintonzoo.com

**SEASON TICKET APPLICATION FORM**

**UNLIMITED ADMISSION - FOR 1 YEAR FROM START DATE**

*You can visit as many times as you wish, during normal opening times, for a year (November through to Easter we are open weekends and school holidays only).*

**DATE YOU WISH TO START YOUR UNLIMITED VISITS FROM \_\_\_\_\_**

**INDIVIDUAL TICKETS** Prices correct as of 01.04.20

1 ADULT £40 \_\_\_\_\_ 1 CHILD (age 2-3) £30 \_\_\_\_\_ 1 SENIOR (age 65+) £35 \_\_\_\_\_

**JOINT DISCOUNT TICKETS**

2 ADULTS £75 \_\_\_\_\_ 2 SENIORS £65 \_\_\_\_\_ FAMILY TICKET £120 \_\_\_\_\_  
(purchased together and living at the same address) 1 adults and 3 children (2-13 years)  
or 2 adults and 2 children (2-13 years)

Please enter names of each ticket holder

NAME .....  
NAME .....  
NAME .....  
NAME .....  
NAME .....  
NAME .....

\*Delete as appropriate

ADULT/OAP/CHILD\*  
ADULT/OAP/CHILD\*  
ADULT/OAP/CHILD\*  
ADULT/OAP/CHILD\*  
ADULT/OAP/CHILD\*  
ADULT/OAP/CHILD\*

Date of birth of children

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TICKET HOLDERS CONTACT DETAILS	
Mailing name:	
Address:	
Telephone:	
Email:	

BUYERS DETAILS IF DIFFERENT	
Name:	
Address:	
Telephone:	
Email:	

**YOUR TICKETS WILL BE READY FOR COLLECTION ON YOUR NEXT VISIT**

BUYING AS A GIFT? A gift voucher can be provided if you are buying this as a gift, please tick if you would like the voucher sent directly to the ticket holders \_\_\_\_\_ or to the buyer \_\_\_\_\_

**Important:** By providing your details you are agreeing to receive exciting news updates, publications and information about activities at the zoo. We will not share your information with any third parties.

Please tick how you would like to receive zoo news: Email  Post  Please do not send me zoo publications

If paying by cheque, please make cheques payable to "LINTON ZOO CONSERVATION PARK"  
**Cheques cannot be accepted for same day admission.**

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

FOR OFFICE USE ONLY Staff name _____ Date of Purchase _____	Tickets made date _____	Checked by _____
Payment Method: Cash _____ Card _____ Cheque _____ Total _____	Made by _____ Code: _____	Code _____