



Please submit this form by fax 602.914.4328 or e-mail teamcallcenter@phoenixzoo.org

Advanced Ticket Sales Form 2019-2020

Date: _____

Company: _____

Contact _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____

Phone: _____ Fax: _____

Tickets (Groups 25 or more)

Adults (14 yrs & up) _____ @ \$18.95 each = \$ _____

Children (3 to 13 yrs) _____ @ \$12.95 each = \$ _____

Total Amount Due: \$ _____

Pick Up/Delivery information (please allow 5 processing days):

Certified Mail (fees apply): \$ _____

Up to 249 tickets - \$5 shipping and handling

250 tickets and above - \$10 shipping and handling

Total Amount Due with postage: \$ _____

OR
Tickets may be picked up in the Guest Services Lobby 9 am to 3 pm (Sept – May) 7 am to 2 pm (Jun – Aug) at:
455 North Galvin Parkway
Phoenix, AZ 85008
Phone: 602.286.3800
Fax: 602.914.4328
E-Mail: teamcallcenter@phoenixzoo.org

Payment Information:

Credit Card #: _____ Exp. Date: _____

Name on Credit Card: _____

The Phoenix Zoo reserves the right of approval on all usage of its name and/or logo(s).
If you have any further questions, please call the Reservations Dept at 602-914-4333.