



TEACHER SAFARI AT RIVERBANKS ZOO & GARDEN

Participant's Name: _____

T-Shirt Size: Adult Medium Adult Large Adult Extra Large

Grade Level Taught: _____ Subject(s) Taught: _____

Your School or Organization: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ District: _____

Email Address: _____

Date of Program: April 4, 2008 Time: 6:30 pm – 9:00 am

Fee: \$38 per person

Payment Options: Visa MasterCard Personal Check

Card Number: _____

Expiration Date: _____

Check Number (make checks payable to Riverbanks Zoo): _____

* Please mail payment and registration form to:

**Riverbanks Zoo & Garden
Education/Amy Stewart
PO Box 1060
Columbia, SC 29202-1060**

You will receive a confirmation letter, at the address given above, further detailing the evening along with a list of items to bring. If you do not receive a confirmation letter or have any questions or concerns, please contact Amy Stewart at 803.779.8717 ext. 1140 or email astewart@riverbanks.org.