

MEMBERSHIP Application



Please visit a membership window after you have completed this application.

MEMBERSHIP TYPES

Adult, child, senior and student memberships include 10% off select purchases, special member events, and unlimited admission for one year.

Under 2 — Free | **Adult Individual (Age 18-59) — \$55** | **Child Individual (Age 2 to 17) — \$55** | **Senior (Age 60 and above) — \$45**

Student — \$45

Must be present and have a high school, junior college, career college or university valid ID card

Individual Plus — \$100

Includes one adult membership, one Happy Hollow Parking Pass and one guest entrance at a reduced rate

Community — \$300

Includes four memberships, one Happy Hollow Parking Pass, 15% off select purchases, and one guest entrance at a reduced rate per Community member
Additional memberships — \$50

Donor Membership — \$1000+

Support Happy Hollow Foundation by joining the Danny the Dragon's Dreambuilders. Packages include memberships, behind-the-scenes experiences, special events and more.

MEMBERSHIP INFORMATION

MEMBER 1 Adult Child Student Senior Renewal Gift - *Fill out gift purchaser section*

First Name _____ Last Name _____ Date of Birth ____/____/____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ E-mail _____

RACE/ETHNICITY (CHOOSE ALL THAT APPLY):

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Black/African | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> South Asian (e.g., Indian, Pakistani) | <input type="checkbox"/> Native Hawaiian/Other |
| <input type="checkbox"/> Descent | <input type="checkbox"/> Filipino | <input type="checkbox"/> East Asian (e.g., Japanese, Chinese, Korean) | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Middle Eastern | <input type="checkbox"/> Native American | <input type="checkbox"/> Decline to state |
| <input type="checkbox"/> Caucasian/White | <input type="checkbox"/> Southeast Asian (e.g., Thai, Cambodian) | <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Other: _____ |

MEMBERSHIP INFORMATION

MEMBER 2 Adult Child Student Senior Renewal Gift - *Fill out gift purchaser section*

First Name _____ Last Name _____ Date of Birth ____/____/____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ E-mail _____

RACE/ETHNICITY (CHOOSE ALL THAT APPLY):

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Black/African | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> South Asian (e.g., Indian, Pakistani) | <input type="checkbox"/> Native Hawaiian/Other |
| <input type="checkbox"/> Descent | <input type="checkbox"/> Filipino | <input type="checkbox"/> East Asian (e.g., Japanese, Chinese, Korean) | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Middle Eastern | <input type="checkbox"/> Native American | <input type="checkbox"/> Decline to state |
| <input type="checkbox"/> Caucasian/White | <input type="checkbox"/> Southeast Asian (e.g., Thai, Cambodian) | <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Other: _____ |

MEMBERSHIP INFORMATION

MEMBER 3 Adult Child Student Senior Renewal Gift - *Fill out gift purchaser section*

First Name _____ Last Name _____ Date of Birth ____/____/____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ E-mail _____

RACE/ETHNICITY (CHOOSE ALL THAT APPLY):

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Black/African | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> South Asian (e.g., Indian, Pakistani) | <input type="checkbox"/> Native Hawaiian/Other |
| <input type="checkbox"/> Descent | <input type="checkbox"/> Filipino | <input type="checkbox"/> East Asian (e.g., Japanese, Chinese, Korean) | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Middle Eastern | <input type="checkbox"/> Native American | <input type="checkbox"/> Decline to state |
| <input type="checkbox"/> Caucasian/White | <input type="checkbox"/> Southeast Asian (e.g., Thai, Cambodian) | <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Other: _____ |

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MEMBERSHIP Application Continued from front side



MEMBERSHIP INFORMATION

MEMBER 4 Adult Child Student Senior Renewal Gift - *Fill out gift purchaser section*

First Name _____ Last Name _____ Date of Birth _____ / _____ / _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ E-mail _____

RACE/ETHNICITY (CHOOSE ALL THAT APPLY):

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Black/African Descent | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> South Asian (e.g., Indian, Pakistani) | <input type="checkbox"/> Native Hawaiian/Other |
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Filipino | <input type="checkbox"/> East Asian (e.g., Japanese, Chinese, Korean) | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> Caucasian/White | <input type="checkbox"/> Middle Eastern | <input type="checkbox"/> Native American | <input type="checkbox"/> Decline to state |
| | <input type="checkbox"/> Southeast Asian (e.g., Thai, Cambodian) | <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Other: _____ |

DUES OVERVIEW

Adult _____ x \$55 = \$ _____

Child _____ x \$55 = \$ _____

Student or Senior _____ x \$45 = \$ _____

Individual Plus _____ x \$100 = \$ _____

Community _____ x \$300 = \$ _____

Additional Community Member _____ x \$50 = \$ _____

Additional Parking Pass _____ x \$50 = \$ _____

Only for Individual Plus (up to 1 additional pass) and community

- City of San José Annual Regional Park Parking Pass Hangtag**
 Separate application must be filled out, please ask cashier.
 \$80 standard rate, \$30 discounted rate for military seniors

Use this section to apply discounts.

Minus Ticket Credit -\$18.00 x _____ = \$ _____

Minus Discounted Ticket -\$15.00 x _____ = \$ _____

Minus Reciprocal Ticket -\$9.00 x _____ = \$ _____

Minus Other Ticket Credit - _____ x _____ = \$ _____

Gift to support Happy Hollow Foundation (tax deductible) \$ _____

TOTAL FEES \$ _____

Gift Purchaser Information

First Name _____ Last Name _____

Phone Number _____ E-mail _____

OFFICE USE ONLY

Student photo ID verified _____

Happy Hollow Parking Pass# _____

Happy Hollow Parking Pass# _____

Happy Hollow Parking Pass# _____

Happy Hollow Parking Pass# _____

IF PAYING BY MAIL

- Visa MC Discover

Card# XXXX - XXXX - XXXX - _____ (Last four digits only).

Signature authorizes for above credit card charge.

Signature _____ Date _____ / _____ / _____

- Check # _____ (Payable to City of San Jose)

Today's admission can be applied to a year long membership. Must attach ticket to have credit applied within 7 days of ticket purchase date.

MEMBERSHIP POLICES

- **Non-refundable and non-transferable**
- **Valid until the end of the month one year from purchase**
- **Each adult, student and senior must show a photo ID to enter**
- **First visit without a membership card or ID card will be a courtesy Happy Hollow look up; second visit will be a \$5 reprint fee**
- **Must have membership card present to have discounts applied**

INDIVIDUAL PLUS AND COMMUNITY

- **Happy Hollow Parking Pass is only valid at the guest lot at 748 Story Road and is not replaceable if lost or stolen. Parking Pass purchaser must be an adult and is responsible for any misuse of the parking pass which may result in a warning, written ticket or membership suspension. Parking passes do not guarantee a parking space will be available. Individual Plus members are limited to two Happy Hollow Parking Passes.**
- **Discounted guest admission is valid for one guest per visit per member**

- I have read and understand the terms and conditions**

_____ Date _____ / _____ / _____

_____ Last Name _____

