

Autism Family Day

at Franklin Park Zoo

Saturday, April 27, 2024

What You Need To Know

Franklin Park Zoo is offering FREE ENTRY to individuals on the autism spectrum. Additionally, Bailey's Team is supporting the cost of one family member or caregiver (must be registered on or before April 20th). All other family members to pay discounted Zoo entry fees: \$19.95 adults (ages 13+), \$12.95 children (ages 2-12)

- **This Event is rain or shine**
- **Autism Family Day Hours:** 9:30 a.m. - 2:30 p.m.; the Zoo closes at 6:00 p.m.
- **Enter through the ZEBRA entrance** at One Franklin Park Road and **go to Bailey's Team registration table.** Please **DO NOT** enter through the **GIRAFFE** entrance.
- **Arrival at registration** on Autism Family Day is between 9:30 a.m. and 12:00 noon.
- **Individuals on the autism spectrum and their caregiver will each receive a gift card provided by the Flutie Foundation** to be redeemed at the Farmhouse Café or the Wild Things Gift Shop.* **Gift Cards do not expire and can be used at a later date.*
- **A tented area will be available to our patrons for lunch or for a safe space to take a break during your time at the Zoo**
- **All guests MUST register by APRIL 20, 2024** to receive a free goody bag provided by Bailey's Team!



Registration Required no later than April 20, 2024
Deadline will be strictly enforced.

Event Sponsored by:



for Autism

Bailey's Team for Autism raises funds and awareness in support of individuals living with autism spectrum disorders and their families, with a focus on programming, education and research.



Doug Flutie Jr. Foundation for Autism helps people and families affected by autism live life to the fullest.



Zoo New England has partnered with KultureCity to become certified as a sensory inclusive site. Designated 'Quiet Zones' are located throughout the park.



ZooNewEngland.org



No payment required at this time. Please fill out this form and return to:

Bailey's Team for Autism, 164 Westside Avenue, North Attleboro, MA 02760 or email sammirobertson@comcast.net

Name of Guest: _____

Name of Accompanying adult Caregiver: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Number of Additional Guests

(not including person with ASD or their caregiver):

Adults (ages 13+): _____

Children (ages 2-12): _____

Children (under 2): _____