

Patterson v. Wildlife Conservation Society

United States District Court for the Southern District of New York Civil Action No. 1:24-cv-00171-JMF Settlement Claim Form

If you are a Settlement Class Member and wish to receive a cash payment, your completed Claim Form must be postmarked on or before July 21, 2025, or submitted online on or before July 21, 2025.

Please read the full notice of this settlement (available at www.bronxzooticketfeesettlement.com) carefully before filling out this Claim Form.

To be eligible to receive a cash payment from the settlement obtained in this class action lawsuit, you must submit this completed Claim Form online or by mail.

ONLINE: By visiting www.bronxzooticketfeesettlement.com and completing an online Claim

Form no later than 11:59 p.m. EST on July 21, 2025.

OR

MAIL: By mailing via U.S. Mail, a completed and signed Claim Form postmarked no later than

July 21, 2025, and addressed to:

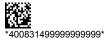
Wildlife Conservation Ticket Fee Settlement Settlement Administrator P.O. Box 2681 Portland, OR 97208-2681

PART ONE: CLAIMANT INFORMATION & PAYMENT METHOD ELECTION

Provide your name and contact information below. It is your responsibility to notify the Settlement Administrator of any changes to your contact information after the submission of your Claim Form.

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POTENTIAL CASH PAYMENT: You may be eligible to receive a pro rata cash payment, which will be based on the total amount of processing fees you paid, if you purchased electronic tickets to the Bronx Zoo from Defendant's website https://www.bronxzoo.com, from August 28, 2022 through and including January 16, 2024.



PREFERRED	PAYMENT	METHOD:
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August 28 website ht information this Claim Settlement	declare under penalty of perjury under the laws of the United States of America that: (i) between august 28, 2022, and January 16, 2024, I purchased one or more electronic tickets to the Bronx Zoo from Defendant's rebsite https://www.bronxzoo.com/ and paid a processing fee in connection with such purchase; (ii) all of the information on this Claim Form is true and correct to the best of my knowledge; and (iii) I am authorized to submit its Claim Form and have not assigned or transferred any rights, claims, or remedies I may be entitled to as a ettlement Class Member in this settlement. I understand that my Claim Form may be subject to audit, verification, and Court review.																										
SIGNATU	RE																D	AT	E	MN	 1	- [_	DE	 - L	Y	YYY	Y

Please keep a copy of your Claim Form for your records.