



# WINE CLUB

## APPLICATION

**\*Must be 21 years or older to join.**

Today's Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Referred by: \_\_\_\_\_

## PLEASE INDICATE THE AMOUNT PER SHIPMENT:

Shipment Choice:  3 Bottles  6 Bottles (2 of each)  12 Bottles (4 of each)  
20% discount 25% discount 30% discount

Wine Club Selection:  Vintner's Choice  Reds Only  Sweets Only  
(whites + reds)

I will pick up at the winery

or

Please ship my wine

## SHIPPING ADDRESS (REQUIRED):

**\*Adult signature is required upon receipt; shipping via UPS. Business address preferable.**

Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Physical Address (no P.O. Box): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Phone: Day ( \_\_\_\_\_ ) Evening ( \_\_\_\_\_ )

Email (required): \_\_\_\_\_

## BILLING INFORMATION (REQUIRED):

**\*Credit card provided will be charged automatically for my wine shipment**

Check here if address is same as delivery.

Credit Card Type:  Visa  A/E  Discover  Mastercard

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVS Code: \_\_\_\_\_

Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*(Please note that we respect your privacy and will not share your information.)*

Authorized Signature: \_\_\_\_\_

(By signing this form, I certify that I am 21 years or older. I authorize the use of my credit card and I will understand and agree to all membership obligations of the Torre di Pietra Wine Club. I am responsible for the notifying Torre di Pietra Vineyards of any address changes prior to the shipment. I understand that any membership is on a voluntary basis. Cancellation notice must be made in writing two weeks prior to the next scheduled shipment.)