Nelson Family
V I N E Y A R D S
Wine Club Membership Form

Yes! I/We \_\_\_\_\_\_ would like to participate in Nelson Family Vineyards Wine Club. I/We understand there will be **two (2) shipments per year** and my/our credit card will be billed at the time of shipment for the cost of the wine and shipping charges. I/We choose to receive the following number of bottles per shipment:

\_\_\_\_\_4 Bottles\_\_\_\_6 Bottles\_\_\_\_12 Bottles15% Discount20% Discount25% Discount

## Please DO NOT include the following varietals in my wine club shipments:

Top Row Cab	_Cabernet Sauv	Zinfandel	Pinot Noir	Barn Ble	endZinfand	el Rosé
Pinot Grigio	ViognierRiesl	ingOrange	MuscatLat	e Harvest	ChardIce Ri	esling
PLEASE PRINT:						
Billing Name:						
Billing Address:						
City:					Zip:	
Home Phone: (	)		Work Phone: (	)		
Email:						
Shipping Name: Shipping Address: City:						
Home Phone: (						
Email:						
Credit Card Type:	VisaMas	tercardD	iscoverAn	nex		
Credit Card #:			V Co	de or CID	#	
Name on Card:	Expiration Date:					
Signature:	Today's Date:					

By signing this form, I understand and agree to the following statements (1) through (10): (1) I must be at least 21 years of age, (2) a person of 21 years or older must sign for the wine shipments upon delivery, (3) shipments made within California are subject to California sales tax, (4) it is my obligation to inform Nelson Family Vineyards in writing of any address change, (5) I will be responsible for shipping charges incurred due to misdirected packages, (6) my credit card will be charged for all re-shipments, (7) wine purchases are non-refundable, (8) Nelson Family Vineyards has the right to postpone shipments, (9) I am obligated to receive at least one shipment, (10) I may cancel my membership by doing so in writing at any time after receiving the initial shipment.