



Shadow Springs
VINEYARD

Wine Club Information

Name First _____ Last _____

Shipping address _____

City _____ State _____ Zip Code _____

Email Address _____

Day time phone number _____

Alternate phone number _____

Credit Card (circle one): Visa Master Card Discover

Card Number: _____

Expiration date: Month _____ Year _____ V-code _____

Billing address _____

City _____ State _____ Zip Code _____

Dry & Sweet (\$250 plus tax) ___ Dry only Wines (\$275 plus tax) ___

Special Notes _____