MJ _____

PD_____

GC ___WG ___

GERVAIS & VINE

WINE CLUB SIGN UP SHEET

PLEASE PRINT LEGIBLY

Name on Membership: _____
****Member must be 21 years old****

Phone Number: (_____)_____

Email:_____
****Make sure your email is accurate because this is how we notify you that the wines are ready to be picked up. If you are giving membership as a gift, put recipient's email here.****

Billing Email Address: _____
****This is where we send the email notifying you of the charge. Can be the same as regular email above.****

Length of Membership: _____ Months

Renewal: Yes No

Payment Information

Card Type (Circle One)	MC VISA AMEX DSC
Card Number	
Expiration Date (MM/YY)	
Billing Address	
Name on Card	

ⓘ By signing you are allowing Gervais & Vine (Caffe Ventures Vista Corporation) to debit your credit card for the amount of one-month wine club membership ($29) through the length of the membership. The debit will take place on the 15th of each month, and acknowledging Following.

ⓘ Monthly wines are available for 45 days only. Any wines not picked up after 45 days will be forfeited and no refund will be given.

ⓘIf your card expires or is declined during the membership period you will be asked to submit new billing information and be charged before receiving your monthly selections.

Signature: _____ Date: _____