# Join the Daven Lore Wine Club!



Ambassador Sampler Red Only *SPRING* *FALL*

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| Member Information | | | | | |
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| Name: |  | | | | |
| Address: |  | |  | |  |
| Start Date: |  | |  | |  |
| Email: |  | | | | |
| Phone: |  | Gift Membership? | |  | |
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| Office Use: Shipping Instructions, Notes, preferences | | | | | |
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| Generally: Ship UPS Pick-Up Both Other(Bonnie’s) Gift □ TY □ | | | | | |
| Recurring Payment Authorization | | | | | |
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| I authorize DavenLore Winery to automatically bill the card listed below for wine club renewal membership fees of $\_\_\_\_\_\_\_ once annually in the Spring/Fall.  Beginning: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_ and ending on: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_.  Card Type: MasterCard Visa American Express Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Cardholder Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Billing Zip Code: \_\_\_\_\_\_\_\_  Card number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expires: \_\_\_\_\_/\_\_\_\_\_  □ Notify me via email when my credit card is charged (make sure address above is correct)    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Cardholder’s Signature Date | | | | | |
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