## **Voces Cellars**

## **Membership Form**

	tion: no P.O. Boxes t) shipping to a busine	This is a business address ss is preferred.	
Company:	Name:		
Address:		City:	
State:		Zip:	
Phone:	Email:		
_	on shipments of wine, we ar olicies if you are shipping o	re not permitted to ship to every state. Please ut of CA.	
Wine shipments require a to a business	and adult signature for deliv	very, therefore we strongly suggest shipping	
Billing Informatio	n: Same as ship	ping (check if applicable)	
Name:			
Address:		City:	
State:		Zip:	
Phone:	Email:		
someone at least 21 ye written notice at least 3 in billing / shipping inf	ars of age must be present as weeks before a schedule formation.	east 21 years of age and acknowledge that to sign for the wineI will send a d wine club shipment indicating a change	
		tion 30 days prior to a wine club  LVisaAmex	
CC#:			
Exp. Date:/	_ Security code:	Zip	
	ents to automatically	oove and authorize Voces Cellars charge your credit card for	
Signature:		Date:	