



Wine Club Membership Application

Membership Purchased:

- For Myself As a Gift

Membership Type:

- Price Point Member / \$65.00 lifetime fee
 High point Member / \$100.00 lifetime fee

Billing Address:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Shipping Address if different:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Any wine shipment requires an adult signature at time of delivery. Please provide a shipping address where the shipment can be signed and received by an adult. The shipment cost varies, depending on the contents and destination. Currently shipping is only available in select states. Please call us to find out if your state qualifies.

Payment Method:

- Check / Wine shipment information will be mailed or emailed one week before the scheduled ship date. Payment can be mailed to Windy Point Vineyards. Wine can not be shipped until payment is received.

- Credit Card

- Visa MasterCard Discover

Card Number _____

Expiration Date: _____

I certify that I am 21 years of age or older and give permission to Windy Point Vineyards to charge my credit card for each shipment at the time of shipment.

Signature: _____

Date of Application: _____

Driver's License Number / State:

Please print this form, fill out and mail back to:

**Windy Point Vineyards
420 Windy Point Drive
Wapato, WA 98951**

If you are uncomfortable sending your credit card information through the mail, please send in the form with your signature and call us with you credit card information. Phone: Tasting Room (509) 877-6824 or Office (509) 877-4446. Thank you & enjoy!