

Wine Club Application

Preferences (check a	ıll that	apply)			
♦ Dry Red	ds ◊I	Ory Whites \diamond	Spicy Meads	♦ Dry M	eads
♦ Sweet (non-spice	cy) Mea	ds ♦ Long-Age	ed Meads	Special Li	mited Releases
Club Level (check or					
♦ 4 bottle	:s ♦6]	bottles \$8 bot	tles 🛮 🗘 10 bot	tles \$ 12	bottles
Billing Information					
Name				Date of	Birth (mm/dd/yy)
Email Address					
Street Address					
City		State	Zip Cod	le	Phone Number
Credit Card Type:	◊ Visa	♦ MasterCard	◊ Discover	♦ Americ	an Express
Credit Card Number			Expiration (m	ım/yy)	Security Code
Order Preference:	≎ Shipp	ing ◇ Pick U	p at Winery		

Shipping Information (if different from billing)

Shipping is available to the following states:

Maryland, Alaska, Florida, Idaho, Louisiana, Missouri, Nebraska, Nevada, New Hampshire, New Mexico, North Dakota, Ohio, Oregon, Virginia, Washington DC, West Virginia, Wyoming

Name		Dat	Date of Birth (mm/dd/yy)	
Email Address				
Street Address				
City	State	Zip Code	Phone Number	

My signature below certifies the following:

- I am an adult 21 years of age or older, and have read and understand the terms and conditions of the membership.
- I authorize Orchid Cellar to automatically charge my credit card on each quarterly release date for the amount of each release, plus any applicable taxes and shipping fees.
- I understand that my participation in the Orchid Cellar Wine Club is ongoing until I choose to cancel.
- I may cancel after the second release date by notifying Orchid Cellar via email at info@orchidcellar.com no less than one month prior to the next release date.
- I understand that it is my responsibility to timely inform Orchid Cellar of changes to my contact information, shipping address, and billing information. I understand additional charges will apply for returned or redirected wine shipments.
- I understand that delivery schedules are subject to change (i.e. Severe weather).
- It is legal to ship wine to the shipping address I have provided.

Signature	Date
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