



ELLIPTICAL SOCIETY APPLICATION

I/We, _____, hereby apply for membership in the Le Cuvier Elliptical Society, & gleefully acknowledge that I will be receiving two annual Le Cuvier shipments of six bottles each, one in the Spring & one in the Fall, & I further acknowledge that said Elliptical shipments will be automatically charged against the following credit account:

Form containing fields for Visa/MC/AMEX #, Exp. Date, Shipment Type, Billing Information, Wine Delivery Address, and Shipping Options.

Fine Print:

- List of 7 terms and conditions regarding membership, shipping, and credit card usage.

MEMBERS ONLY
WINERY & TASTING BY APPOINTMENT: 9750 ADELAIDA RD.
MAIL: 3333VINE HILL LN. ▲ PASO ROBLES, CA 93446
TEL: 805-238-5706 OR 800-549-4764 ▲ FAX: 805-237-0577
EMAIL: CLUB@LCWINE.COM
WWW.LCWINE.COM

Signature: _____
Date: _____
Referred by: _____