



VINOTASTING CLUB Business Membership Application

Company Name _____

Primary Contact _____

Address _____

City, State, Zip _____

Telephone _____ Fax _____

Email _____

Website URL: _____ Facebook: _____

Winery Restaurant Lodging Wine Bar Transport/Tours

Wine Store Other _____

Describe Your Club Offer:

Value: \$ _____ Discount or Savings percentage: _____

2010 Club Vendor Benefits

- Promotion of your offer or incentive to the Vinotasting Club
- Annual Club Listing in *Wine Country International Magazine*
- Listing with hotlink to your website on www.Vinotasting.com
- Participating Vendor Counter Card & Window Decal
- Complimentary Subscription to Vinotasting Newsletter and Wine Country International® magazine **Annual Fee: \$95 per physical location**

Check Enclosed Charge to Credit Card Page 2

Wine Country Network, Inc.
PO Box 6023, Broomfield, CO 80021
Tel. (303) 664-5700 • Fax (303) 648-4199

www.Vinotasting.com
[Twitter.com/vinotasting](https://twitter.com/vinotasting)



CONFIDENTIAL CREDIT CARD BILLING FORM
VINOTASTING CLUB ANNUAL VENDOR FEE: \$95

Please complete this form to set-up billing your service invoices on a credit card. Your account will be billed as agreed.

Company Name: _____

Your Name: _____

Credit Card Billing Address (This must be same as on your bill)

Name: _____
First Middle Last (As it reads on card)

Address: _____

City: _____ State: _____ Zip Code: _____

Tel. _____

Email Address: _____
(Charges will be confirmed by email)

American Express () VISA () Master Card () Diners Club ()

CC number: _____

Expiration Date: _____

All Vinotasting credit card sales are made through our affiliate company NIDEA Corp. I
AUTHORIZE **NIDEA CORPORATION** TO CHARGE MY ABOVE CREDIT CARD THE
VENDOR FEE.

X _____ DATE _____

PLEASE FAX THIS FORM TO 303 648-4199. THANK YOU FOR YOUR BUSINESS!

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