

# Membership Application

## Applicant Information

Name:		
Date of Birth:	Email:	Phone:
Current Address:		
Suburb:	City:	Post Code:
All applicants must be 18 years or over		ID.

## Employment Information

Current Employer:		
Employer Address:		
Phone:	E-mail:	Fax:
Suburb:	City:	Post Code:
Position:		

## Wine Preference


## Spouse Information, if joint membership

Name:		
Date of Birth:	Email:	Phone:

## Spouse Employment Information

Current Employer:		
Employer Address:		
Phone:	E-mail:	Fax:
Suburb:	City:	Post Code:

## Terms and Conditions

I authorise the verification of the information provided on this form as to my age being 18 years and over. I have received a copy of this application and understand that tasting is for the purpose of purchasing choice. I agree to accept mailings of monthly newsletters and wine club specials. This wine card remains the property of Freshchoice Nelson City and is non-transferable. Tasting credit will only be loaded once a month. Freshchoice Nelson City reserves the right to refuse access to intoxicated people and cancellation of membership due to breaches of these terms.

Signature of Applicant:	Date:
Signature of Spouse, only if for a joint membership:	Date:

