

Wine Club Membership Application

Membership Type: Mixed Red White

Membership Quantity: 6 Bottle 12 Bottle
(Quarterly)

Ship To: Business (Best Way) Residence

Delivery: To Address Below You Pick Up

Member's Name: _____

Spouse's Name: _____

Date of Birth (Must be 21): _____

Daytime Phone: _____

Email Address: _____

Shipping Address: _____

City: _____ State: _____ Zip: _____

Payment Information:

Visa Mastercard Amex Discover

CC#: _____ Exp. Date: _____

Signature: _____ Date: _____

Name on Card: _____

(if Different from Shipping Address)

Billing Address: _____

City: _____ State: _____ Zip: _____



Saddle Pals
Wine Club



Join Today!

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