



KATHKEN VINEYARDS

W I N E C L U B



Thank you for your interest in the Kathken Wine Club! To Join, please:

 Complete the member form below,
and fax it to 503.399.5476, or

 Call us at 503.316.3911 and provide
us with your information, or

 Return this completed form by mail to:

Kathken Vineyards
Wine Club
5739 Orchard Heights Road NW
Salem, OR 97304

MEMBER INFORMATION:

First & Last Name _____

Daytime Phone _____ Evening Phone _____

Email Address _____

Date of Birth _____

(for legal purposes) Month/ Day/ Year

BILL TO:

Address _____

Suite or Apt: _____

City _____

State _____ Zip _____

SHIP TO:

Address _____

Suite or Apt: _____

City _____

State _____ Zip _____

Check here if same as Billing

METHOD OF PAYMENT:

VISA _____ MASTERCARD _____ Card Number _____ Exp Date _____

Security Code Number _____

DELIVERY INFORMATION:

DHL _____ Hold at Winery for Pick up _____

Due to individual state shipping laws, we can only ship to the following states: AK, AZ, CA, CO, CT, DC, DE, FL, GA, IA, ID, IL, IN, KY, LA, ME, MI, MN, MO, MT, NC, ND, NE, NM, NV, NY, OH, OK, OR, RI, SC, SD, TN, TX, VA, VT, WA, WI, WV, WY

How did you hear about us? _____

Submission of this form serves as authorization for Kathken Vineyards to charge your credit card on a quarterly basis for Kathken Vineyards Wine Club purchases and any associated shipping costs.