



Membership Application

The undersigned hereby applies for active membership in Wine Institute, a nonprofit corporation, and agrees, if elected, to be bound by and comply with the bylaws of said corporation.

It is understood that the Wine Institute will not be responsible for any representations made by any officer, agent or employee and that this Application is not made because of, or by virtue of, any representations made by any agent, officer or employee of said corporation.

Firm Name: _____

Doing Business As (*name by which business is known*): _____

Mailing Address: _____

Address of Licensed Premise: _____

County of Licensed Premise: _____

Telephone: _____ FAX: _____

Web Site: _____ E-Mail: _____

Federal (TTB) BW/BWC/DSP Permit#(s): _____ Authorization Date(s): _____

(Include all BW Nos. owned or leased by above Firm)

State (ABC) Winegrowers License #(s): _____ Authorization Date(s): _____

Type of Organization: (choose one) Corporation Individual Partnership LLC LLP

(If corporation, application must be accompanied by a certified copy of a Resolution of the Board of Directors thereof, authorizing the execution of the application.)

Application Signed By: _____
Name Title

Date Application Signed: _____

NOTE: Each member is asked to designate one person as the "Key Official" to whom Wine Institute mailings should be addressed. Please indicate below information for that person, if different from above.

Key Official Name: _____ Title: _____

Key Official Address: _____

Key Official E-mail Address: _____

Mail or Email Completed Application and Dues Computation Form to:

Allison Moore, Member Relations Director
Wine Institute, amoore@wineinstitute.org
915 L Street, Suite 1190, Sacramento, CA 95814

A DUES COMPUTATION FORM MUST ACCOMPANY THIS APPLICATION