

★ ★ ★
IVY'S AXE ENROLLMENT FORM
★ ★ ★

NAME: _____

SHIPPING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

SOMEONE OVER 21 YEARS OF AGE MUST BE AVAILABLE TO RECEIVE SHIPMENT.

WILL BE PICKING UP AT THE WINERY: _____

BILLING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

TO RECEIVE EMAIL UPDATES & NEWSLETTERS FROM HARRIS BRIDGE VINEYARD.

CREDIT CARD #: _____

EXP. DATE: _____ **CREDIT CARD TYPE:** _____

3 DIGIT # ON BACK OF CARD: _____

YOUR CARD WILL BE CHARGED AT TIME OF SHIPMENT

DATE JOINED: _____



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