



Sweet Child of Wine

TAPD Fall CE



Please check all that you will attend:

- Welcome Dinner — Thursday Evening
- CE Course — Friday
- Wine Tour (including Friday dinner)
- CE Course — Saturday
- Special Food Request: _____

| | |
|-------------------------------|--------|
| Name: | |
| Address: | |
| Cell Phone: | Email: |
| In case of emergency contact: | |
| Name: | Phone: |

Please check all that your guest will attend:

- Welcome Dinner — Thursday Evening
- Wine Tour (including Friday dinner)

| | |
|-------------------------------|---------------|
| Name: | Relationship: |
| Address: | |
| Cell Phone: | |
| In case of emergency contact: | |
| Name: | Phone: |

Payment

| | | | |
|---------------------|---------------------|-------------------|--------------|
| Credit Card Number: | | | |
| Expiration: | CVC (3 digit code): | Billing Zip Code: | Amount Paid: |