



Membership Application

First and Last Name: _____

Spouse's First and Last Name: _____

Street Address: _____

City, State & Zip: _____

Email Address: _____

Spouse's Email Address: _____

Home Phone: _____

Mobile Phone(s): _____

Work Phone(s): _____

Occupation(s): _____
(for internal use only)

Please list your name(s) as you would like it to appear on nametags:

Please sign the following affidavit:

"I/we certify that all information contained herein is correct and that I/we are over 21 year of age."

Signature

Date

Signature

Date

Annual membership is \$25 per person.

Please make checks out to Cedar Mountain Wine Society and return in enclosed envelope.
You will be notified when your application has been processed.

mailing address: P.O. Box 675 • Scurry, Texas 75158
6950 Shady Lane • Scurry, Texas 75158 • 972-452-3273