

2017 Member Application

**Are you interested in Volunteering for Wine
Community Events?**

Date _____

Name(s): _____

- Volunteer for Wine Events
- Volunteer for Grape Stomp Auction
- Educational Seminars & Events
- Volunteer for Marketing
- Volunteer for Poster Distribution

Mailing Address: _____

Phone: _____ Cell: _____

Email: _____ 2nd Email: _____

2017 CWA Associate Membership (Check One)
\$35 per person _____ \$50 per couple _____

Make your check payable to: **Calaveras Winegrape Alliance**

Or pay over the phone by calling the
office at 209-728-9467

Please mail your check & application to:

Calaveras Winegrape Alliance

PO Box 2492 Murphys, CA 95247 or email to calaveraswines@att.net

Fax 209-728-9738