



Loyalty Membership

Date: _____ LRP# _____

First Name: _____ Last Name: _____ Known As: _____

Residential Address: _____ Postal _____

Business Address: _____ Postal _____

Event Info should go to...? HOME / OFFICE Email Address: _____

Home Phone: () _____ Birthday: _____ / _____ / 19 _____

Business Phone: () _____ Anniversary: _____ / _____ / _____

Fax Phone: () _____ Other Significant Date: _____

Favourite Beverages: _____ Spirits: _____

Favourite Wines: _____ Beers: _____

Favourite Restaurants: _____

Authorized for: Credit Card Charge Credit Card # _____ exp: _____ / _____

Or On Account # _____ Credit Card Signature: _____