



# Registration Form



First & Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

Cell #: \_\_\_\_\_

JACKET SIZE ☐ XS ☐ S ☐ M  
☐ L ☐ XL

SOCIAL HANDLES  Instagram: \_\_\_\_\_  
 Twitter: \_\_\_\_\_  
 Facebook: \_\_\_\_\_

DIETARY RESTRICTIONS \_\_\_\_\_  
\_\_\_\_\_

SHARE Please share what you hope to learn from The Little Nell Wine Academy and any goals you may have for the workshop.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU REGISTERED FOR A VIRTUAL TASTE OF WINE ACADEMY? ☐ Y ☐ N

CREDIT CARD INFORMATION Name on Card: \_\_\_\_\_  
Credit Card #: \_\_\_\_\_  
Expiration Date: Month \_\_\_\_\_ Year \_\_\_\_\_  
Card Verification #: \_\_\_\_\_

BILLING ADDRESS First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Country: \_\_\_\_\_ State: \_\_\_\_\_  
Zip/Postal Code: \_\_\_\_\_

50% payment is due upon registration. The remaining 50% is due February 1, 2021.

Please submit registration form to The Little Nell Events Department at [events@thelittlenell.com](mailto:events@thelittlenell.com).