

ORDER FORM

Please complete the information on the present order form and send it with your payment by mail at:

Vinavoce - Customer Service - 31 rue Albert Varnet - 26000 VALENCE

Or by Fax: 00 33 4.69.96.61.70

Or on our website: www.vinavoce.com

BILLING INFORMATION

Title: Mr. / Mrs. / Ms. Last Name: First Name:
(Business Name)
Street
City
State Zip
Phone
Email
Delivery Phone Number (Required)

SHIPPING (if different from above)

Title : Mr. / Mrs. / Ms. Last Name: First Name:
(Business Name)
Street
City
State Zip
Delivery Phone Number (Required)

Delivery instruction (digital code, slot allocations...):

If you are sending the order as a gift, you may write a customized message (optional):

YOUR ORDER :

Designation	Quantity	Unit Price	Total TTC
* 22€ for an order < 150 €	Participation in shipping costs *		
Between 150 and 400 € = 18€			
> 400 € = free shipment	TOTAL		

PAYMENT :

Check payable to Vinavoce

Credit Card:

Credit Card Number:

Expiration Date:

Credit Card Type: Visa

MasterCard

American Express

Card holder name:

Date and Signature (compulsory)

Abuse of alcohol is dangerous for your health, use with moderation.

You must be 18 years and over to order