



P.O. Box 942 King City, CA 93930

Annual Membership Form

Primary Members Last Name: _____ First Name: _____

Second Members Last Name: _____ First Name: _____

Primary Members Email: _____ Second Members Email: _____

Information regarding packets and events will be distributed through email.

Members Mailing Address: _____

(Please include city, State and Zip Code)

Primary Members Phone Number: _____

Children (20 years of age or younger). Children 21 or over must purchase their own adult membership.
Please list Child's Name and Age:

Child's Name	Child's Age
_____	_____
_____	_____
_____	_____

If you need additional lines, please list the names and age on the back of this form.

The annual membership fee is \$325 per adult member or \$650 per couple.

Membership includes:
SVF Kick-Off Ticket
SVF Wine Tasting Entrance during the Fair
Daily Entrance into the Fair (Adults Only)
One Daily Parking Pass per Adult
Entrance into the Hospitality Room during the Fair