



## Scuola del Vino

**First name**

**Last name**

**Age** (to participate in the Wine Classes, participants must be 19+)

- 19 – 25
- 26 – 35
- 36 – 45
- 46 – 55
- 55+

**Email**

**Tel.**

**Postcode**

**Please select whichever best applies to you**

- Hospitality**
- Trade Professional**
- Press / Media**
- Wine Lover**

**Classes you are registering for**


**Method of Payment**

- Cheque**
- Credit Card**

**Additional comments/particular interest**