



VINES & WINES 2005 REGISTRATION FORM FOR ABSENTEE BIDDING

Please fill out the following and fax or mail

- 1. Last Name _____
- 2. First Name _____
- 3. Company _____
- 4. Street Address _____
- 5. City _____
- 6. State _____
- 7. Zip/Postal Code _____
- 8. Telephone # _____
- 9. Fax # _____
- 10. E-Mail Address _____
- 11. Driver's License # _____
- 12. Driver's License State _____
- 13. Credit card # _____
- 14. Expiration date _____
- 15. Second card, if needed _____
- 16. Expiration date of second card _____

Important- please read the following:

- 1. Vines and Wines is hereby authorized to bid on my behalf through a stand-in agent on certain item(s). Vines and Wines will obtain the article(s) as reasonably as possible (as though I were present, bidding for myself). I understand that my instructions to my agent will be kept secret except for necessary parties.
- 2. Vines and Wines is not responsible for failure to execute or be successful with an absentee bid(s) for any reason whatsoever.
- 3. All bids will be treated as offers made subject to the Rules for the Vines and Wines Auction.
- 4. I agree with the Rules for the Vines and Wines Auction found in the catalogue.
- 5. Vines and Wines is hereby authorized to charge my credit card(s) noted above for the bids I have set forth below.

Please execute these bids on my behalf. (You can submit this form in person, by mail or by fax. Please sign the form below or it will not be considered as "submitted")

Item Number _____	Maximum bid amount \$ _____
Item Number _____	Maximum bid amount \$ _____
Item Number _____	Maximum bid amount \$ _____

Signed _____ Print Name _____

For further information, call Healthcare Foundation Northern Sonoma County
P.O BoX 1025, Healdsburg, CA 95448
(707) 473-0583 Fax (707) 473-0587