



HOLLYWOOD RATED

SPIRITS - REGISTRATION FORM

CONTACT INFORMATION (company information below will be posted as contact info on our website)

NAME _____ TITLE _____
 COMPANY NAME _____ STREET ADDRESS _____
 CITY/STATE/ZIP _____ WEBSITE _____
 PHONE/FAX NUMBER _____ COMPANY E-MAIL _____

PREPARERS INFORMATION (please fill out if different from contact information)

NAME _____ TITLE _____
 DIRECT PHONE NO. _____ DIRECT E-MAIL _____

PAYMENT INFORMATION (\$95 per product)

CHECK ENCLOSED CHECK SENT SEPARATELY CC: MASTERCARD VISA AMEX
 CREDIT CARD NUMBER _____ EXPIRES _____ CCV _____
 CARDHOLDER NAME _____ BILLING ADDRESS _____

PRODUCT(S) INFORMATION

COMPLETE NAME ON LABEL	ALC%	NATION OF ORIGIN <i>(If Applicable)</i>	AGE/DIST. DATE/YEAR	BATCH/LOT NO. <i>(If Applicable)</i>	RETAIL PRICE

SUBMISSIONS / SHIPMENT

Ship two (2) 750ml (or equivalent volume) _____ bottles and this entry form to:

Hollywood Rated, 7095 Hollywood Boulevard, Suite 411, Hollywood, California 90028

Phone (323) 488-6311 | Fax (323) 850-5302 | info@hollywoodrated.com | hollywoodrated.com