



Registration form - to be returned

THANK YOU FOR INFORMING US OF YOUR PARTICIPATION

Muscats du Monde®
Maison des vigneron
du Château de Chaintré
71570 CHAINTRÉ
FRANCE

FROM FRANCE

Tel. 03 85 37 43 21
Fax 03 85 37 19 83

FROM ABROAD

Tel. 333 85 37 43 21
Fax 333 85 37 19 83

INTERNET

infos@muscats-du-monde.com
www.muscats-du-monde.com

1 • GENERAL INFORMATION

Company _____
 Name _____
 First Name _____
 Adress _____
 Zip code _____ City _____
 Country _____
 Tel. _____ Fax _____
 E-mail _____
 Web site : http:// _____

2 • SAMPLES INFORMATION

I am submitting _____ wine sample(s)

Constitutes of 6 bottles of 750 ml each or 10 bottles of 500 or 375 ml (with front and back labels).

To facilitate our services, please verify that each sample is accompanied by the following items:

- **A technical sheet** (available on our site or included in this folder) dedicated to presentation including: development, area of growth, maturity of wine, density of plantation, grape harvest, wine making (barrel or tank), maturation of wine...
- **An analysis bulletin** dated less than one year ago. It must specify the parcel number as well as the following results: specific gravity, actual and potential alcohol content, reducing sugar, pH, total acidity, volatile acidity, free SO₂, total SO₂, pressure above atmospheric and CO₂.
- **3 labels** (with front and back labels).

For each sample, please tick the items attached to the bottle package and those that will be sent separately:

Wines denomination	Year	Parcel number*
Denomination: 1 Attached items : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels Separately : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels		For this wine, I wish to received a tasting notes report in: <input type="checkbox"/> French <input type="checkbox"/> English
Denomination: 2 Attached items : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels Separately : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels		For this wine, I wish to received a tasting notes report in: <input type="checkbox"/> French <input type="checkbox"/> English
Denomination: 3 Attached items : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels Separately : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels		For this wine, I wish to received a tasting notes report in: <input type="checkbox"/> French <input type="checkbox"/> English
Denomination: 4 Attached items : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels Separately : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels		For this wine, I wish to received a tasting notes report in: <input type="checkbox"/> French <input type="checkbox"/> English
Denomination: 5 Attached items : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels Separately : <input type="checkbox"/> Analysis bulletin <input type="checkbox"/> Technical sheet <input type="checkbox"/> Labels		For this wine, I wish to received a tasting notes report in: <input type="checkbox"/> French <input type="checkbox"/> English

*Traceability number, vat number, lot number.

BPARTF1-AG-MDM2011.1



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3 • TRANSPORT

I entrust my samples to a forwarding company of my choice: _____

I entrust to DHL Economy Express the goods transport (see DHL shipment charge table on page 4 of the Registration folder)

DHL shipping order number: _____

According to the enclosed price list:

Weight Category n° _____ and geographic zone n° _____ for an amount of: _____ € 1

4 • REGISTRATION FEES

For each sample, I will pay the sum of: 180 € x _____ sample(s) = _____ € 2

Tasting notes report (optional):

In French: 40 € x _____ sample(s) = _____ € 3

In English: 50 € x _____ sample(s) = _____ € 4

5 • PAYMENT

Payment made in total to: Service Actions Qualité

Before June 6, 2011, the sum of: 1 + 2 + 3 + 4 _____ €

Payment will be made by:

Cheque (1)

International money order

Transfert to our account CREDIT AGRICOLE MACON N° 943 3326 1000 (2) IBAN : FR76 1780 6000 8094 3332 6100 008 - BIC AGRIFRPP 878 Please attach a photocopy of the payment form.

Name of your bank: _____

Reference of your bank transfer: _____

International Credit Card (Please fill in the following information)

MasterCard Visa American Express

Name of cardholder: _____

No. (16 figures): _____

Last 3 digits on the back of the card: _____ Amount: _____ Euros

Expiry date: _____ Signature: _____

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(1) Cheque in euros must be from a French banking institution. (2) Transfer in euros (all costs payable by the participant).