Wellington Brewery – Event New Customer Form

Local Lager Distribution Request Form

Date:

Event Information

Event Date: Delivery:

Permit Information: (Special Occasion Permit, Private, or Liquor License)

Permit Number (if applicable):

Establishment Name:

Accounting Contact Name: Accounting Email or Contact #:

Delivery Contact #: Order Contact #:

Address: City:

Store #: Phone #:

Order Quantity:

Rotary Club Information

Incorporated Name: Rotary #:

Address: City:

Contact Member: Phone #:

Treasurer Contact: Email:

Secretary Contact: Email:

Send completed Form to gino@wellingtonbrewery.ca. Rotary Clubs must be incorporated to participate in this fundraiser.