



Date: _____ **Location Purchased / Taste:** _____

Wine Name / Producer: _____

Country / Region: _____

Price: _____

Clarity: clear | cloudy

Depth: pale | medium | opaque

Color: *White:* yellow | gold | brown
Rose: pink | salmon | orange
Red: purple | ruby | garnet | brown



LOOK

Thoughts:

Depth: weak | medium | intense

Aromas: fruity | floral | spicy | vegetal | oak | nutty | earthy | chemical



SMELL

Thoughts:

Sweetness: dry | off-dry | medium | sweet

Acidity: flat | fresh | high

Tannin: low | medium | high



TASTE

Body: light | medium | full

Depth: weak | medium | intense

Flavor: fruity | floral | spicy | vegetal | oak | nutty | earthy | chemical

Thoughts:

Length/Finish: short | medium | long

Conclusion:

