



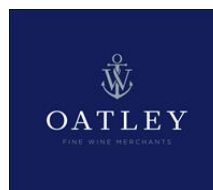
WINE GUILD VICTORIA INCORPORATED

FUNCTION NOTICE

58TH ANNUAL GENERAL MEETING

- Date:** Wednesday 12th July 2017
- Venue:** Box Hill Golf Club Ph: (03) 9808 1526
202 Station Street
Box Hill South VIC 3128
- Time:** 6.30pm Gourmet Canapes and Taltarni Blanc de Blanc
7.00pm Annual General Meeting
- Host:** Oatley Fine Wine Merchants
Guest Speakers: Andrew Coorey – National Sales Manager
John Monkhouse – Sales Manager
- Wines:** Selection of high quality fine wines especially paired with Menu
Taltarni Blanc de Blanc
Derwent Estate Riesling
Rymill Cabernet Sauvignon
Robert Oatley Shiraz
- Menu:** Modern Australian Fine Dining Cuisine
4 course set Menu
Gourmet Canapes, Entrée, Mains & Dessert
Tea & Coffee – available throughout the evening
- Parking:** Off street car parking
- Cost:** **Includes 1 bottle of wine to take home.**
Members: \$89.00
Non Members: \$95.00
- RSVP: Friday 30th June 2017**

Wine Guild Victoria Incorporated promotes the responsible consumption of alcohol.





REMITTANCE ADVICE

58TH ANNUAL GENERAL MEETING

WEDNESDAY 12th July 2017

MEMBERS: \$89.00 NON MEMBERS: \$95.00

RSVP: Friday 30th June 2017

Online Booking Form: www.wineguildvictoria.com.au/online-function-booking-form
Ctrl + Click to RSVP & receive email acknowledgement

Post to: **The Treasurer, Wine Guild Victoria, PO Box 1000, SUNBURY VIC 3429**

Phone: **Graeme Lofts: 0409 831 883**

Email: vicepres@wineguildvictoria.com.au

I/We will attend the 58th Annual General Meeting on Wednesday 12th July 2017.

1. Please charge my Master Card Visa

Card Number:

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Card Holder's name: _____ Expiry Date: _____

Signature: _____ Total amount: \$ _____

2. **Direct Deposit details:** Westpac Bank BSB 033 138, Account name: Wine Guild Victoria

Account Number: 167701 **Reference: AGM Your surname.**

3. Enclosed is a cheque/money order for: \$ _____ payable to Wine Guild Victoria Incorporated.

Please print names clearly:

Member: _____ Mobile Ph: _____

Member: _____ Mobile Ph: _____

Guest: _____ Mobile Ph: _____

Guest: _____ Mobile Ph: _____

Special Dietary Requirements:

Name and Dietary Requirement:

Name and Dietary Requirement:
