

# WINE GUILD VICTORIA INCORPORATED



## FUNCTION NOTICE

### BEAUJOLAIS NOUVEAU



#### *A CELEBRATION OF THE FIRST FRENCH VINTAGE 2018*

**Date:** *Thursday 15<sup>th</sup> November 2018*

**Venue:** Goodwin Close Retirement Village  
2A St James Court, Blackburn South

**Dress:** French theme of Red, White and Blue

**Time:** 6.30pm for 7.00pm start  
Sparkling wine on arrival

**Host:** Ashleigh Millar

**Wines:** Selected by Ashleigh Millar  
Francois Vouvray  
Pierre Naigon White burgundy  
Beaujolais Nouveau  
Gamay (Pfeiffer)

**Menu:** 4 course French meal typical of Beaujolais prepared by renown chef Marcus Gildon  
Amuse Bouche  
Ham Hock Terrine, Cornichons / Baguettes  
Chicken, Red Wine Jus  
Clafoutis

**Parking:** Street parking available

**Cost:** Members: \$80.00      Non Members: \$92.00

**RSVP:** 8<sup>th</sup> November 2018





**REMITTANCE ADVICE**

**BEAUJOLAIS NOUVEAU**

**Goodwin Close Retirement Village**

**THURSDAY 15TH NOVEMBER 2018**

**MEMBERS: \$80.00**

**NON MEMBERS/GUESTS: \$92.00**

**RSVP: 8<sup>th</sup> November 2018**

Online: [www.wineguildvictoria.com.au/upcoming-functions](http://www.wineguildvictoria.com.au/upcoming-functions)

**Ctrl + Click to RSVP & receive email acknowledgement**

Post to: **THE SECRETARY, WINE GUILD VICTORIA, PO BOX 1000, SUNBURY. VIC. 3429**

Phone enquiries: Dianne Lofts 0412 756 073

Email enquiries: [secretary@wineguildvictoria.com.au](mailto:secretary@wineguildvictoria.com.au)

I/We will attend Goodwin Close Retirement Village on Thursday 15th November 2018.

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: BN>Your surname.**

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

**Please print names clearly:**

Member: \_\_\_\_\_ Mobile Ph: \_\_\_\_\_

Member: \_\_\_\_\_ Mobile Ph: \_\_\_\_\_

Guest: \_\_\_\_\_ Mobile Ph: \_\_\_\_\_

Guest: \_\_\_\_\_ Mobile Ph: \_\_\_\_\_

**Special Dietary Requirements: (Name/s and Dietary Requirement)**

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