



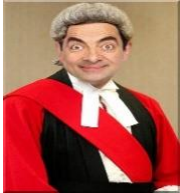
# WINE GUILD VICTORIA INCORPORATED

## FUNCTION NOTICE

### TASTE 'N' TALK NIGHT

## YOU BE THE JUDGE !

A blind tasting of a *mystery single varietal wine* selected from different Australian regions and European countries?



Do you prefer the Australian style or the old world style?

We'll put your individual judgements together and provide a group judgement.

Will you be surprised or even shocked? Or will your prediction be proved to be correct?

This experience will be fun, interesting and . . . yes, educational.

**DATE:** Thursday 16th March 2023

**VENUE** St John's Catholic Parish Hall  
Coghlan Centre  
494 Whitehorse Road, Mitcham. Vic

**TIME:** 6:30pm: Sparkling on arrival for 7.00pm start

**MENU:** A light supper – finger food  
Tea & coffee with cake

**PARKING:** Parking in the school grounds via Elizabeth Street, on the basket ball courts.

**COST:** Members \$40.00 Non-Members \$45.00

Payment must be made when booking

**RSVP: Thursday 9th March 2023**





**REMITTANCE ADVICE**

**TASTE 'N' TALK NIGHT**

**THURSDAY 16TH MARCH 2023**

**MEMBERS: \$40.00**

**NON-MEMBERS: \$45.00**

Payment must be made when booking

**RSVP: Thursday 9<sup>th</sup> March 2023**

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

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

Phone: **Dianne Lofts 0412 756 073**

Email: **secretary@wineguildvictoria.com.au**

I/We will attend the Taste 'N' Talk on Thursday 16<sup>th</sup> March 2023.

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: TNT > 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 and Dietary Requirement:

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