

M.L.S.V. General Meeting 12th October, 2019 - Mr Geoffrey Watson SC

ACCEPTANCES: PLEASE RETURN THIS FORM WITH FULL PAYMENT AND LIST NAMES OF ALL ATTENDEES

Post to: PO BOX 17 TEESDALE VIC 3328 or Fax to: 1300 66 26 85 with credit card details

Tax Invoice for GST: Please record amount paid \$_____ (inc. GST) and retain a copy for your records.

Tables of 8-10 people may be reserved provided full payment for all attendees is made when you return this notice.

MEMBERS: Drinks and Meeting Only ____ x \$50.00; Drinks, Meeting and Dinner ____ x \$160.00 per member (inc. GST)

GUESTS: Drinks and Meeting Only ____ x \$60.00; Drinks, Meeting and Dinner ____ x \$180.00 per guest (inc. GST)

Members (include dietary preferences): _____

Guests (include dietary preferences): _____

Please make cheques payable to: "The Medico-Legal Society of Victoria" TOTAL AMOUNT \$_____ (inc. GST)

OR payment via Credit Card: Mastercard ☐ Visa ☐ American Express ☐ Diners Club ☐

Credit Card Number: _____

Expiry: ____/____ Name on Card: _____

Signature: _____ **PLEASE PRINT ALL DETAILS CLEARLY**

The charge to Members for these meetings is set on a "cost recovery" basis.