



The Medico-Legal Society of Queensland is welcoming 2010 - and the new decade

Good-bye Noughties! Hello Teens!

Enjoy a drink and the epicurean delights at the renowned Clovelly Estate's City Cellar Door in Red Hill.

Members, non-members, partners and guests are welcome.

Contribute your ideas, discuss latest developments and learn about the Society's plans for 2010.

Call in on your way home to sample Clovelly Estate's multi award winning wines from its vineyard in Queensland's South Burnett region.

VENUE Clovelly Estate Cellar Door 210 Musgrave Road, Red Hill.

Limited parking under the building and ample parking on the adjacent vacant lot, corner Musgrave Road and Enoggera Tce.

DATE Thursday 18 February 2010 6.00 – 8.00 pm

DRESS Business attire or smart casual

COST \$50 pp (includes beverages, canapés & cheese tasting)

RSVP Monday 15 February 2010

Tickets will not be issued. Collect your namebadge at the dinner.

Complete and return this form to:

MLSQ, PO Box 5145, Kenmore East, Q 4069
Email: office@medico-legal.com.au **Tel & Fax: 07 3871 0595**

My name: Mr/Mrs/Miss/Ms/Dr/Prof/Justice/Judge

.....
(Preferred Name in BLOCK LETTERS please)

Please circle profession: Doctor Lawyer Other

Email:

Telephone:

My partner's name: Mr/Mrs/Miss/Ms/Dr/Prof/Justice/Judge

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(Preferred Name in BLOCK LETTERS please)

Special requirements: (eg: dietary, wheelchair, seating arrangements)

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Number of tickets

Tickets: Cost: \$50 pp x

Total amount owing: \$

I am interested in joining the MLSQ.
Please email a membership form

Payment Options:

- Payment is required to confirm reservation
- Cancellation Policy: Refund for cancelled individual tickets available up to 16 February 2010.

- Cheque payable to: Medico-Legal Society of Queensland
- Bank transfer: BSB 084004 Account Number 675289682
Please include attendee's name in the transaction reference and advise payment by email to office@medico-legal.com.au

Please debit my credit card: Mastercard Visa

Credit Card Number: _____ / _____ / _____ / _____

Expiry date: ____ / ____

Cardholder:

Signature: