MONDAY 25TH NOVEMBER 2019



CROWN PERTH

Strictly black tie event – 6:30pm pre function drinks for 7pm start

GALA DINNER BOOKING FORM / TAX INVOICE

CONTACT DETAIL						
Contact Person:						
Address:					Dealerate	
Suburb:						
Phone:						
Email:						
PURCHASE TICK If claiming a members				nes a tax invoice	once payment is rece	
□ CIA Member	Ticket Qty:	x \$20	5.00 (inc GST) per tid	cket = TOTAL	_\$	
☐ <i>Non Member</i> Ticket Qty: x \$225.00			5.00 (inc GST) per tid	inc GST) per ticket = TOTAL \$		
			, , , ,			
(Please specify by writing	•					
No.	FULL NAME	Ē.	DI	DIETARY REQUIREMENTS		
1						
2						
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4						
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8						
9						
10						
☐ Individual Bookii						
(Paying as part of a grou	p? If so please advise	which group y	ou are booking)			
HOW TO RSVP A	ND BOOK TICK	ETS				
Phone: (08) 922713	41 Fax: ((08) 9467 28	Email:	info@catering	institute.com.au	
Post: Catering Ins	titute of Australia (V	VA) – GPO	Box E203, Perth 60	00		
PAYMENT DETAIL	LS (PLEASE PRINT CLE	EARLY)				
☐ Direct Transfer			titute of Australia (W	A) ABN: 9	456 7095 903	
	Bank: Westpac I		BSB: 036 000		nt No: 690 851	
☐ Credit Card	•		202. 000 000			
Name on Card:						
Credit Card No:			CV	No:	Expiry Date:	

CONDITIONS