

St Stephen's Hospital

WINTER CHARITY BALL



TICKET DETAILS:

Please book: Ticket/s
at \$120 per ticket (inc GST)

Please book: Table/s
at \$1,100 per table of 10 (inc GST)

Table name:

CONTACT DETAILS:

Contact name: _____

Company: _____

Address: _____

Phone: _____

Email: _____

Dietary requirements: _____

PAYMENT DETAILS:

Please find enclosed my cheque for \$.....made payable to St Stephen's Hospital

Please charge my Bankcard / Mastercard / Visa (please circle) Total amount: \$.....

Cardholder's name: _____

Card expiry date: / CCV:

Card number: □□□□ □□□□ □□□□ □□□□

Cardholder's signature: _____

Saturday 17th July 2010
6.30pm onwards
Brolga Theatre & Convention Centre

To book your tickets please complete this form and
return by Friday 2nd July 2010 to:

The Event Coordinator
St Stephen's Hospital
PO Box 798, Maryborough Q 4650
or Fax to: 4122 3669