



AUCKLAND
MEDICO-LEGAL
SOCIETY

DINNER ACCEPTANCE FORM

to be received by the Thursday before the Dinner

To: Catherine Miller
Secretary
Auckland Medico-Legal Society
PO Box 77-111
Mt Albert
AUCKLAND 1350

or

Email to: medico-legal@officeassistant.co.nz

- I **will be** attending the Dinner of the Auckland Medico-Legal Society on 201_
- I **will not be** attending the Dinner of the Auckland Medico-Legal Society on 201_

Signature*

* Not needed if e-mailing

(Please print name clearly)

- I will be bringing a medical/legal guest with me to this Dinner meeting.
- I **enclose** my cheque for \$95.00 in payment for their attendance.
- Or
- I confirm that I have paid \$95.00 by direct credit into the Society's bank account number
01 0274 0226453 00

Guest's Name

My guest is interested in becoming a member of the Society: Yes/No