



**- THIS FORM MUST ACCOMPANY SAMPLES -**  
**and please email form to: [tasting@winestate.com.au](mailto:tasting@winestate.com.au)**

**Email: [tasting@winestate.com.au](mailto:tasting@winestate.com.au) OR Fax: +61 (0) 8 8357 9212**

**DISCLAIMER:** Details given below will be taken as correct to be published in the magazine. Please make sure all details are correct/legible and wine name is how you would like it to be published. Winestate assumes no responsibility for missing or incorrect details. Price is required for ALL tastings (non-negotiable). One entry consists of 2 (TWO) bottles, unless otherwise advised.

Tasting submitting to: **NEW SOUTH WALES**

Company supplying samples:

Contact person:	Position:
Phone number:	Fax number:
Email address:	Web:
Postal address:	

Principal Brand Name & Special Name <small>(if applicable - i.e. Reserve/Single Vineyard)</small>	Region (G.I.) <small>(as stated on label)</small>	Varietal <small>(as stated on label)</small>	Vintage	\$RRP <small>(\$N/A if not provided)</small>

For additional entries please use a copy of this form.

**\*Disclaimer:**  
 By entering this wine show I agree that the information I have supplied is correct and that the wines submitted meet the eligibility requirements.

# WINESTATE MAGAZINE



## - TAX INVOICE AU -

TASTING SUBMITTING TO: **NEW SOUTH WALES**

Date Submitted:

Company Name:

Number of Entries:

Cost per entry - AUD **\$50.00 each** *(including GST)*

**TOTAL \$**

### PAYMENT DETAILS (please complete and tick relevant box)

I enclose my payment by cheque

OR

Direct Deposit

ANZ Bank  
BSB 015-208  
Account No: 1981 44076

Date of transaction: .....

Transaction Reference: *(Please include co. name & tasting name)*

.....  
.....

OR

Visa     Mastercard

No.

Cardholder's Name .....

Expiry Date .....

Signature .....

