



**- 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: **RIVER REGIONS**

Company supplying samples:

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

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

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:

**RIVER REGIONS**

Date Submitted:

Company Name:

Number of Entries:

Cost per entry - AUD

**\$60.00 each** (including GST)

TOTAL \$

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



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 \_\_\_\_\_