

2018Chinese New Year Celebration



**Phone:** Date: Time: **Parking:** 

Dragon Boat Restaurant 金龍閣 Level 2, Shop 445-451/2-10 Darling Drive, Harbourside Shopping Centre, Darling Harbour, Sydney 2000 (02) 9282 9922 24<sup>th</sup> February 2018 (農曆大年初九) 6:30 pm for 7:00 pm start

Harbourside Car Park at 100 Murray Street, Pyrmont https://www.wilsonparking.com.au/park/2047\_Harbourside Get discounted parking ticket after dinner at the restaurant entitles a rate of \$15 flat



Come to enjoy the Great Time, Live Band, **Magic Show** and Lion Dance!

Sponsored by

Good health, good luck and much happiness throughout the year

戊戌年吉祥

Happy **Chinese** New Year



## **RSVP by 2<sup>nd</sup> February 2018**

| Names of Adults:   | $\underline{(G)}(\underline{(G)})$ | Dietary restr                              | ictions Y/N:            |
|--|------------------------------------|--|-------------------------|
| Child's Name(s) & Age:   |                                    | □ seat with parents □ seat with other kids |                         |
| □ No preferred seating □ Preferred seating with (Table of 10)  |                                    |  |                         |
| Member/spouse/family   | \$88 each                          | Ticket(s)                                  | Amount:                 |
| Non-member   | \$108 each                         | Ticket(s)                                  | Amount:                 |
| Kids at age of 6 or less   | \$45 each ()                       | Ticket(s)                                  | Amount: ()              |
| Kids at age of 7 or above  | \$88 each                          | Ticket(s)                                  | Amount:                 |
|  |                                    | Total Amount:                              |                         |
| □ Cheque enclosed (payable to Australian Chinese Medical Ass Inc) or charge my □ Visa / □ Mastercard |                                    |  |                         |
| Card No/   |                                    |  | Exp/                    |
| Name on Card   |                                    | _ Signature _                              | <u>) ((6) ((6) ((6)</u> |
| Nomination for HSC High Achiever with ATAR>99, PLEASE ALSO SEND Email to office@acma.org.au:         |                                    |  |                         |
| My Child's Name  | ATAR                               | <u>(6))M(0)</u> )                          | University              |
| Program in 2018  |                                    |  |                         |
| Tel: 98736222 or Fax completed form to 92670003 or   |                                    |  |                         |
| Post to Suite 604, 309 Pitt Street, Sydney 2000 (c/o Winglong Pty Ltd)                               |                                    |  |                         |
| CALL CALL  |                                    |  |                         |