

# Carols at the Convent

Saturday 5 December 2009, 6pm



Mercy Health  
Care first

TICKETS	PRICE	QUANTITY	TOTAL COST
Family (2 adults, 2 children) .....	\$50	.....	.....
Adult .....	\$20	.....	.....
Concession (specify type below) .....	\$12	.....	.....
Child (under 16) .....	\$10	.....	.....
Child (under 5) .....	FREE	.....	NIL
<b>COST OF TICKETS</b>			<b>\$</b> .....
<b>TOTAL AMOUNT</b>			<b>\$</b> .....

Please make cheque or money order payable to: Mercy Health

**Enclosed:**  Cheque  Money order      **or debit my:**  Mastercard  Visa

**Cardholder Name:** .....

**Expiry Date:** ...../.....      **Signature:** .....

**Card Number:** .....

**Title:**     Mr     Mrs     Miss     Ms     Dr

**First Name:** .....      **Last Name:** .....

**Address:** .....

**Phone Number:** .....      **Email Address:** .....

**Concession Type:** .....      **Concession Card Number:** .....

Mercy Health    678 Victoria Street, Richmond Vic 3121  
Phone 1300 0 MERCY    Fax (03) 8416 7955