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AvMA Annual Charity Golf Day

Thursday 24 June 2010

Mannings Heath Golf Club, Mannings Heath, Horsham, West Sussex



The sixth AvMA Charity Golf Day, kindly sponsored by Barker Gillette LLP, will take place on Thursday 24 June 2010. The Welcome Reception for the Annual Clinical Negligence Conference will take place later that evening at the Hilton Brighton Metropole so the Golf Day offers the perfect start to the essential event for clinical negligence specialists.

Superbly located in 500 acres of rolling Sussex downland and just 30 minutes from Brighton, Mannings Heath has two championship courses at the forefront of 'must play' golf hot-spots in the UK. Opened in 1996, the beautiful par 70 Kingfisher Course, with USGA specification tees and greens, is set in an Area of Outstanding Natural Beauty and offers breathtaking panoramic views over the tree tops and across the South Downs. See more of Mannings Heath Golf Club at www.manningsheath.com.

We will be playing in teams of four and you are invited to either enter your own team or we will be happy to form a team for you with other individuals. The cost is only £98 + VAT (total £115.15) per golfer, which includes bacon rolls on arrival, 18 holes of golf and a buffet, drinks and prize-giving at the end of the day. We can also arrange travel to and from the Hilton Brighton Metropole for you. All profits go directly to AvMA's charitable work.

Should you have any queries please contact the AvMA Events team on
020 8688 9555, e-mail conferences@avma.org.uk. www.avma.org.uk/events

AvMA Annual Charity Golf Day

GOLF DAY 2010 REGISTRATION

To book your place(s), please complete the form below in
BLOCK CAPITALS and return to:

**AvMA Golf Day, 44 High Street, Croydon CR0 1YB
or DX 144267 Croydon 24**

Fee: £98 + VAT per person = £115.15

Firm/ Organisation: _____

Names of players: _____ Handicap: _____

1. _____

2. _____

3. _____

4. _____

Address/DX: _____

Tel: _____ Fax: _____ e-mail: _____

I enclose a cheque for £_____ Signature: _____

Please invoice Name of contact for invoice: _____

Tel: _____ Fax: _____