

**RADIO, INTERNET, ELECTRONIC MEDIA & COMMERCIAL PHOTOGRAPHERS
ACCREDITATION REQUEST FORM**

NAME OF RALLY: _____

Media Organisation _____
 Contact Name _____
 Business Address _____
 City _____
 Postal Code _____
 Country _____
 Telephone _____
 Fax _____
 Email _____

ACCREDITATION TYPE:

() **TERRESTRIAL RADIO**
 () **INTERNET / ELECTRONIC MEDIA****
 CONTENT: WORDS, PICTURES, AUDIO AND/OR VIDEO †
 () **COMMERCIAL PHOTOGRAPHER**
 COMMERCIAL USE:

** PHOTO TABARDS ARE NOT ALLOCATED TO WEBSITES

† WEBSITES WISHING TO BROADCAST MOVING IMAGES MUST APPLY TO EBU USING THE TV ACCREDITATION FORM

REQUEST ACCREDITATION FOR:

	Name	Job Title	Tabard requested
1			
2			
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**REQUESTS MUST BE RECEIVED BY E-MAIL NO LATER THAN
FOUR WEEKS BEFORE THE EVENT**

