



## Media Accreditation Form

Dates of attendance and notes:

Full Name:

Media represented:

- Television
- Radio
- Press Agency
- Written press
- Photographer
- Website
- Website and Photographer

Full Address:

Business Address:

Tel:

Fax:

Mobile:

Email:

Website:

Professional Membership:

- National Press Association Membership
- International Press Association Membership  AIPS

What facilities do you require?

Phone  Fax  ISDN

Send to: [jernejafiser@yahoo.co.uk](mailto:jernejafiser@yahoo.co.uk)  
(phone: +386 40 574534)