



MEDIA ACCREDITATION FORM

9 JUNE 2019

(Closing date 5 June 2019)

NAME

PROFESSION

(PHOTOGRAPHER, JOURNALIST, ONLINE REPORTER, CAMERA JOURNALIST, TV REPORTER, RADIO REPORTER, TECHNICIAN)

ADDRESS

POSTAL CODE

PLACE

COUNTRY

PHONE

EMAIL

PRESS ID

PLEASE ADD A DIGITAL COPY OF YOUR PRESS ID

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MEDIA ORGANIZATION

MEDIA TYPE:

PRESS AGENCY

DAILY

MAGAZINE

RADIO

PHOTO AGENCY

FREELANCE, WORKING FOR

REQUESTED FACILITIES

YES/NO PARKING

YES/NO WORK PLACE IN PRESS CENTER

YES/NO PHOTO POSITION INFIELD (LIMITED AVAILABLE)

YES/NO DESK ON PRESS STAND

Retour Nederlandse Sport Pers: info@nsp.nl