**Media Accreditation Application Team Form**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Round 2 of the 2014 FIA European Rally Championship**  **Round 1 and 2 of the 2014 Latvian Rally Championship**  **RALLY LIEPĀJA** | | | | | | | | | | |
| Liepaja, Kuldiga - Latvia | | | January 31 – February 2, 2014 | | | | | | | |
| **ACCREDITATION DEADLINES** | | | | | | | | | | |
| **The deadline to submit the Media Accreditation Application Form is January 26, 2014.**  The organisers shall not guarantee confirmation of application forms submitted by media representatives after the established term. | | | | | | | | | | |
| **PERSONAL INFORMATION ABOUT MEDIA TEAM LEADER** | | | | | | | | | | |
| Name Surname | | | | |  | | | | | |
| Address | | | | |  | | | | | |
| Mobile phone | | | | |  | | | | | |
| E-mail | | | | |  | | | | | |
| Insurance policy No. | | | | |  | | | | | |
| Emergency contact (Name Surname) | | | | |  | | | | | |
| Emergency contact (Mobile phone) | | | | |  | | | | | |
| **PROFESSION** | | | | | | | | | | |
| Journalist – print media | | Journalist – TV | | | | | | Media Photographer | | |
| Journalist – digital media | | Journalist – radio | | | | | | TV/ video Cameramen | | |
| Other: | | | | | | | | | | |
| **INFORMATION ABOUT THE REPRESENTED MEDIA** | | | | | | | | | | |
| Title |  | | | | | | | | | |
| Country |  | | | | | | | | | |
| Address |  | | | | | | | | | |
| Phone No. |  | | | | | | | | | |
| Internet address |  | | | | | | | | | |
| Short description |  | | | | | | | | | |
| Medium | TV | | | Radio | | | Printed | | | Internet portal |
| Other: | | | | | | | | | |
| Frequency | Daily | | | Weekly | | | Monthly | | | Other: |
| Auditorium, circulation |  | | | | | | | | | |
| Regional coverage | International | | | | | National | | | Regional: | |
| **INFORMATION ABOUT THE CHIEF (SPORTS) EDITOR** | | | | | | | | | | |
| Chief (Sports) Editor |  | | | | | | | | | |
| Phone No. |  | | | | | | | | | |
| E-mail |  | | | | | | | | | |

|  |  |
| --- | --- |
| **DESCRIPTION OF JOURNALIST OR PHOTOGRAPHIC ACTIVITY** | |
| Previous activity about *Rally Liepāja* |  |
| Previous activity about motorsports |  |
| Planned activity about *Rally Liepāja* |  |
| **ADDITIONAL INFORMATION** | |
| Do You need a media tabard? Yes No | |
| **Upon request of the Organiser, each accredited representative is obliged to provide to the Organiser the evidence of journalist of photographic activity.** | |
| **Filled-in Media Accreditation Application Form shall be sent to the Organisers**  **via e-mail** [**janis@lvrally.com**](mailto:janis@lvrally.com)**.** | |

**By submitting a filled-in Media Accreditation Application Form I confirm that I have reached the age of 18, I accept Media Accreditation Rules and Media Safety Rules, that all the information in this Media Accreditation Application Form is true and that I take full responsibility for my actions.**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION ON MEDIA REPRESENTATIVE #2** | | | |
| Name Surname | |  | |
| Address | |  | |
| Mobile phone | |  | |
| E-mail | |  | |
| Insurance policy No. | |  | |
| Emergency contact (Name Surname) | |  | |
| Emergency contact (Mobile phone) | |  | |
| **PROFESSION** | | | |
| Journalist – print media | Journalist – TV | | Media Photographer |
| Journalist – digital media | Journalist – radio | | TV/ video Cameramen |
| Other: | | | |
| **ADDITIONAL INFORMATION** | | | |
| Do You need a media tabard? Yes No | | | |

**By submitting a filled-in Media Accreditation Application Form I confirm that I have reached the age of 18, I accept Media Accreditation Rules and Media Safety Rules, that all the information in this Media Accreditation Application Form is true and that I take full responsibility for my actions.**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION ON MEDIA REPRESENTATIVE #3** | | | |
| Name Surname | |  | |
| Address | |  | |
| Mobile phone | |  | |
| E-mail | |  | |
| Insurance policy No. | |  | |
| Emergency contact (Name Surname) | |  | |
| Emergency contact (Mobile phone) | |  | |
| **PROFESSION** | | | |
| Journalist – print media | Journalist – TV | | Media Photographer |
| Journalist – digital media | Journalist – radio | | TV/ video Cameramen |
| Other: | | | |
| **ADDITIONAL INFORMATION** | | | |
| Do You need a media tabard? Yes No | | | |

**By submitting a filled-in Media Accreditation Application Form I confirm that I have reached the age of 18, I accept Media Accreditation Rules and Media Safety Rules, that all the information in this Media Accreditation Application Form is true and that I take full responsibility for my actions.**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION ON MEDIA REPRESENTATIVE #4** | | | |
| Name Surname | |  | |
| Address | |  | |
| Mobile phone | |  | |
| E-mail | |  | |
| Insurance policy No. | |  | |
| Emergency contact (Name Surname) | |  | |
| Emergency contact (Mobile phone) | |  | |
| **PROFESSION** | | | |
| Journalist – print media | Journalist – TV | | Media Photographer |
| Journalist – digital media | Journalist – radio | | TV/ video Cameramen |
| Other: | | | |
| **ADDITIONAL INFORMATION** | | | |
| Do You need a media tabard? Yes No | | | |

**By submitting a filled-in Media Accreditation Application Form I confirm that I have reached the age of 18, I accept Media Accreditation Rules and Media Safety Rules, that all the information in this Media Accreditation Application Form is true and that I take full responsibility for my actions.**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION ON MEDIA REPRESENTATIVE #5** | | | |
| Name Surname | |  | |
| Address | |  | |
| Mobile phone | |  | |
| E-mail | |  | |
| Insurance policy No. | |  | |
| Emergency contact (Name Surname) | |  | |
| Emergency contact (Mobile phone) | |  | |
| **PROFESSION** | | | |
| Journalist – print media | Journalist – TV | | Media Photographer |
| Journalist – digital media | Journalist – radio | | TV/ video Cameramen |
| Other: | | | |
| **ADDITIONAL INFORMATION** | | | |
| Do You need a media tabard? Yes No | | | |

**By submitting a filled-in Media Accreditation Application Form I confirm that I have reached the age of 18, I accept Media Accreditation Rules and Media Safety Rules, that all the information in this Media Accreditation Application Form is true and that I take full responsibility for my actions.**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION ON MEDIA REPRESENTATIVE #6** | | | |
| Name Surname | |  | |
| Address | |  | |
| Mobile phone | |  | |
| E-mail | |  | |
| Insurance policy No. | |  | |
| Emergency contact (Name Surname) | |  | |
| Emergency contact (Mobile phone) | |  | |
| **PROFESSION** | | | |
| Journalist – print media | Journalist – TV | | Media Photographer |
| Journalist – digital media | Journalist – radio | | TV/ video Cameramen |
| Other: | | | |
| **ADDITIONAL INFORMATION** | | | |
| Do You need a media tabard? Yes No | | | |

**By submitting a filled-in Media Accreditation Application Form I confirm that I have reached the age of 18, I accept Media Accreditation Rules and Media Safety Rules, that all the information in this Media Accreditation Application Form is true and that I take full responsibility for my actions.**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION ON MEDIA REPRESENTATIVE #7** | | | |
| Name Surname | |  | |
| Address | |  | |
| Mobile phone | |  | |
| E-mail | |  | |
| Insurance policy No. | |  | |
| Emergency contact (Name Surname) | |  | |
| Emergency contact (Mobile phone) | |  | |
| **PROFESSION** | | | |
| Journalist – print media | Journalist – TV | | Media Photographer |
| Journalist – digital media | Journalist – radio | | TV/ video Cameramen |
| Other: | | | |
| **ADDITIONAL INFORMATION** | | | |
| Do You need a media tabard? Yes No | | | |

**By submitting a filled-in Media Accreditation Application Form I confirm that I have reached the age of 18, I accept Media Accreditation Rules and Media Safety Rules, that all the information in this Media Accreditation Application Form is true and that I take full responsibility for my actions.**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION ON MEDIA REPRESENTATIVE #8** | | | |
| Name Surname | |  | |
| Address | |  | |
| Mobile phone | |  | |
| E-mail | |  | |
| Insurance policy No. | |  | |
| Emergency contact (Name Surname) | |  | |
| Emergency contact (Mobile phone) | |  | |
| **PROFESSION** | | | |
| Journalist – print media | Journalist – TV | | Media Photographer |
| Journalist – digital media | Journalist – radio | | TV/ video Cameramen |
| Other: | | | |
| **ADDITIONAL INFORMATION** | | | |
| Do You need a media tabard? Yes No | | | |

**By submitting a filled-in Media Accreditation Application Form I confirm that I have reached the age of 18, I accept Media Accreditation Rules and Media Safety Rules, that all the information in this Media Accreditation Application Form is true and that I take full responsibility for my actions.**