



MEDIA ACCREDITATION REQUEST 12 ORE DI IMOLA 24 -26 May 2018

PUBBLICATION PHOTO AGEN	ON / NCY / FREE LANC	ER					
ADDRESS							
CODE AREA	CIT	Y		COUN	ITRY		
EDITOR IN C	HIEF						
MOBILE			FAX				
EMAIL			WEBSITE				
AGENCY	DAILY W	EEKLY	MONTHLY	WEB	BLOG	TV	OTHER
COVERAGE		CIRC	ULATION				
ACCREDITATION REQUEST MEDIA / PHOTOGRAPHER FOR: SURNAME NAME							
	ITATION REQU	JEST ME		TOGF	RAPHE	R FC	DR:
		JEST ME				R FC	DR:
SURNAME			NAME)F BIR ⁻			DR:
SURNAME PLACE OF BI	RTH JOURNALIST		NAME DATE C)F BIR ⁻	ГН		DR:
SURNAME PLACE OF BI TITLE:	RTH JOURNALIST		NAME DATE O TOGRAPHE)F BIR ⁻	ГН		DR: