



3 October 2015

Media Accreditation 2015 – Application Form

NAME:

ADDRESS:

CITY / TOWN:

PHONE: MOBILE:

FAX :..... EMAIL:

MEDIA ORGANISATION you are representing:
(Name of publication, web site, freelance etc)

Your MEDIA ROLE on this event: Journalist Photographer

Journo/Photog Film Crew

Do you require access to the MEDIA ROOM? Yes No
(For the work you intend to do on the event)

This form must be received by **FRIDAY 18 September 2015**

SEND TO: Rally Wairarapa Media Accreditation, PO Box 6400, Marion Square Wellington or

EMAIL TO: jody@seabrightmotorsport.co.nz

Media Enquiries Contact: Jody Seabright, Ph: 04 232 7328 (home); Mobile 021 717676

