



event:

EC Round 5, Höljes - Sweden

Name:	<input type="text"/>	
Adress:	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
Phone:	<input type="text"/>	
E-mail:	<input type="text"/>	ERPA member No:
Press card:	<input type="text"/>	<input type="text"/>
I am	Journalist <input type="checkbox"/>	Radio <input type="checkbox"/>
	Photographer <input type="checkbox"/>	TV <input type="checkbox"/>

EDITOR Information	
Name:	<input type="text"/>
Adress:	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Phone/Fax:	<input type="text"/>
E-mail:	<input type="text"/>

Uncomplete forms without editorial information will be refused!

I confirm that all information are correct, and I am over 18 years old

I agree to send all my journalist work of the event to the ERA press coordinator

Please send this form not later than 14 days before the event to:
the ERA Press Coordinator, address below

Accreditation forms received later and uncomplete will not be accepted!

Signature:

ERA Press Coordinator:

Johnny Loix

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