

2017 ONE EVENT INTERNATIONAL MEDIA APPLICATION FORM

Dear Applicant,

To assure proper processing of your request, please be sure to fill in the whole form (below), attach a letter of referral from the media's editor in chief and samples of press material featuring the FIM Supermoto World and European Championship (pdf format is preferred). **Applications must be received by no later than 2 weeks before the event at the contacts of the local organizer's press coordinator.**

Furthermore, please note the following points:

- The Media Pass will be released at the Organiser's discretion. Approbations will be notified via e-mail.
- The validity of the Media Pass is of the single event written on the pass.
- The Media Pass does not carry the right to film without BPPROM authorisation. For more details contact Ms Valentina Boccadolce, BPPROM Media Manager, at vb@bprom.org.
- The holder of the Media Pass agrees to abide by the rules, conditions and limitations imposed by BPPROM and CMS/FIM to ensure the proper and safe running of the event.
- The designated holder of the Media Pass waives all rights and titles to any legal claim arising from any accident or damage caused in conjunction with their presence at the event.
- BPPROM is the owner of the Media Pass, and have the right to withdraw it at any time without previous notice.
- The use of the Media Pass is governed by the pass conditions boards displayed at the various entrances to the track area. To enter the track, the designated holder must wear a bib or vest.
- The Media Pass must be presented in conjunction with valid identification papers upon request.
- The granting of the Media Pass does not exempt the bearer from local laws and regulations.
- Holders of the Media pass will have to **send the material published on the Grand Prix where they have been accredited** (pdf format is preferred) to vb@bprom.org.
- Holders of the Media pass who have also been accredited to film will have to **send the material produced in the Grand Prix where they have been accredited** in a video format readable on pc to vb@bprom.org
- **The Media Pass can only be used by the designated holder who acknowledges and accepts the above conditions, and commits himself/herself to comply strictly with them.**

We thank you in advance for your cooperation and understanding. Our goal is to issue Media Passes to professionals only. This way we can ensure a professional working environment, and avoid any kind of abuse.

Best Regards,

BPPROM

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1. MEDIA

MEDIA NAME: _____ **COUNTRY:** _____

ADDRESS: **STREET:** _____

CITY: _____ **POST CODE:** _____ **COUNTRY:** _____

PHONE: + _____ **FAX:** + _____
(with area code) (with area code)

E-MAIL: _____ **WEB:** _____

PUBLICATION: NEWSPAPER MAGAZINE RADIO NEWS AGENCY PHOTO AGENCY
 WEBSITE ONLINE MAGAZINE TV PROGRAM TV STATION OTHER

TYPE: GENERAL SPORTS MOTORSPORTS BIKES OTHER _____

COVERAGE: INTERNATIONAL NATIONAL REGIONAL LOCAL
(selling area)

FREQUENCY: DAILY WEEKLY BI-WEEKLY MONTHLY OTHER _____

CIRCULATION: **ISSUES PER YEAR:** _____ **READERS PER YEAR:** _____

EDITOR IN CHIEF **FULL NAME:** _____ **EMAIL** _____ **PHONE (with area code)** + _____

PUBLISHING GROUP **NAME** _____ **WEBSITE** _____

2. JOURNALIST

NAME: _____ **SURNAME:** _____

CATEGORY: JOURNALIST PHOTOGRAPHER JOU/PH RADIO REPORTER RADIO TECHNICIAN
 CAMERAMAN TV TECHNICIAN OTHER _____

BIRTH DATE:

DAY	MONTH	YEAR
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NATIONALITY: _____

ADDRESS: **STREET:** _____

CITY: _____ **POST CODE:** _____ **COUNTRY:** _____

PHONE: + _____ **MOBILE:** + _____
(with area code) (with area code)

FAX: + _____ **E-MAIL:** _____
(with area code)

PREFERRED MAILING ADDRESS: PROFESSIONAL PERSONAL **IMPA MEMBER:** YES NO

3. ADDITIONAL INFORMATIONS FOR AGENCIES AND FREELANCE JOURNALISTS

Publications supplied with text/photos/videos. Specify: name, type, coverage, frequency, circulation, editor in chief, publishing group HERE

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