

PRESS ACCREDITATION FORM

IADE: 16 rue Attarchia Ariana Sup 2080 Tunis, Tunisia Phone : +216 55 023 000 Fax : +216 71 706 807

MEDIA INFORMATION

Media Name	<input type="text"/>		
Chief Editor Title	Ms <input type="checkbox"/> Mr <input type="checkbox"/>		
Chief Editor Name	<input type="text"/>		
Address	<input type="text"/>		
City	<input type="text"/>		
Country	<input type="text"/>	Postal code	<input type="text"/>
Invoicing address	<input type="text"/>		
City	<input type="text"/>	Postal code	<input type="text"/>
Country	<input type="text"/>		
Phone 1	<input type="text"/>	Phone 2	<input type="text"/>
Fax	<input type="text"/>	Mobile phone	<input type="text"/>
E-mail	<input type="text"/>	Website	<input type="text"/>

Type of Media	<input type="checkbox"/> Press Agency	<input type="checkbox"/> TV	<input type="checkbox"/> Radio	<input type="checkbox"/> Weekly
	<input type="checkbox"/> Monthly	<input type="checkbox"/> Daily	<input type="checkbox"/> Multimedia Press	<input type="checkbox"/> Foreign Press
Other type	<input type="text"/>			

JOURNALIST (Attach a copy of your press card)

Title	Ms <input type="checkbox"/> Mr <input type="checkbox"/>		
First and last name	<input type="text"/>	Nationality	<input type="text"/>
Mobile phone	<input type="text"/>	Press Card Number	<input type="text"/>
Email	<input type="text"/>	ID or Passport Number	<input type="text"/>
Position	<input type="checkbox"/> Chief Editor	<input type="checkbox"/> Heading editor	<input type="checkbox"/> TV Reporter
	<input type="checkbox"/> Journalist	<input type="checkbox"/> Photographer	<input type="checkbox"/> CorrespondantPress
Other Position	<input type="text"/>		

CONDITIONS

PRESS ACCESS TO THE EVENT

Access to the event will be denied to any unauthorized person.

Journalist should be present himself to the reception desk with the duly completed form, press card, and a personnal document of identification.

SIGNATURE & MEDIA STAMP

Date

Signature and stamp of Chief Editor