









Media Accreditation Application Form

Personal Details	(ALL FIELDS ARE IMANDATORT)
NAME (Please Print) Mr / Ms GIVEN NAME(S)	FAMILY NAME
POSTAL ADDRESS (Please Print)	I AWILI IV WIL
CITY/TOWN COUNT	Date of Birth
TELEPHONE: MOBILE:	FACSIMILE:
INTENDED JOURNALIST PHOTOGRAPHER OF	THER E-MAIL:
PREFERRED CONTACT METHOD DE-MAIL MOBILE FACSIMIL	E ☐TELEPHONE ☐ OTHER FIA PASS NUMBER:
STAGE ACCESS: (EXPERIENCED PHOTOGRAPHERS ONLY) (REQURED	/ NOT REQUIRED)
TEAM AND DRIVER NAME (FOR OFFICIAL MEDIA ACCOMPANYING WITH CERTAIN	TEAM)
EMERGENCY CONTACT: NAME:	RELATIONSHIP: PHONE:
PREVIOUS EVENT COVERAGE (Please refer to	WRC, APRC and JRC events)
2018 2017	2016
Professional Details	
PUBLICATION(S)	NAME OF ORGANISATION
POSTAL ADDRESS (Please Print)	COUNTRY
EDITOR (Please Print) Mr / Ms GIVEN NAME(S)	FAMILY NAME
TELEPHONE:	FACSIMILE:
E-MAIL	WEBSITE
FIELD	□ Newspaper □ International Agency □ Other
FREQUENCY Daily Weekly Month	
	DISCLAIMER
RALLY HOKKAIDO in relation to the event anyone else involved in the event including incident occurring to my company or compa a result of a mistake by the organisers or of	HOKKAIDO, I will comply with all directions of the Organisers of t. I acknowledge that neither the FIA, JAF, nor the Organisers or competitors shall be liable for my death, any bodily injury, or any other anions, regardless of the fact that such incident may have occurred as ther authorised officials. I will accept complete liability for any incident accept the inherent dangers of motorsport, pledge to exercise due
DATED THIS DAY OF 2018	NAME (SIGNATURE)

CLOSING DATE FOR APPLICATIONS 24 August 2018

RALLY HOKKAIDO Secretariat Homei bldg. Minami 4-9, Nangodori 19, Shiroishi-ku, Sapporo

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