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Application Form for Additional Use of Photos/Videos Date: / / * Please fill in with block letters (all the fields are mandatory)

Requester (media firm)

Company Name:		Department:		
Postal Address:				
Representative: Given Name:	Surname:		(M/F)	Title:
TEL:		FAX		
E-MAIL		Website		

etailed explanation of additiona/new use

Details of the use, including URL, channel and/or covered area

RALLY HOKKAIDO Secretariat

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