



LATE ACCREDITATION FORM

To be completed and signed by each applicant:

|    |                                  |  |
|----|----------------------------------|--|
| 1  | Ms / Mr                          |  |
| 2  | First / Given Name               |  |
| 3  | Last / Family Name               |  |
| 4  | Nationality (as per passport)    |  |
| 5  | National Press card N°           |  |
| 6  | AIPS / Other Press card N°       |  |
| 7  | Title / Agency / Network / Media |  |
| 8  | Country                          |  |
| 9  | Category of Media*               |  |
| 10 | Mobile Phone                     |  |
| 11 | Email address                    |  |

\* E = Written Press, Radio      EP = Photographers      EE, EEP = Web / Blog Editors and Photographers  
EF, EFP = Journalists / Photographers from *European Gymnastics* member federations  
HB = Host Broadcaster (HBA = Directors; HBB = Producers/Commentators; HBC = Technicians)  
RT = Right Holders (RTA = Directors; RTB = Producers/Commentators; RTC = Technicians)  
ENR = Non-Right Holders

**Zones are allocated as per *European Gymnastics* Accreditations Rules. Not valid without a copy of a valid press card or confirmation letter from an identified media outlet!**

With his / her signature, the applicant agrees with the *European Gymnastics* Media Declaration.

Date:

Signature

|   |  |
|---|--|
| <b>European Gymnastics decision and signature</b> |  |
|---|--|