

Polish Constitution Day Parade



MEDIA ACCREDITATION REQUEST FORM

Name: _____

Address: _____

City, State/Country, Zip Code: _____

Office #: _____ Cell: _____

Email: _____

Please mark next to the appropriate title:

<input type="checkbox"/>	Writer/Reporter	<input type="checkbox"/>	Publisher	<input type="checkbox"/>	Producer
<input type="checkbox"/>	Editor	<input type="checkbox"/>	Photographer	<input type="checkbox"/>	On-Air Host
<input type="checkbox"/>	Freelance	<input type="checkbox"/>	Camera		
<input type="checkbox"/>	Other _____				

Name of Publication/Outlet _____

Please mark next to type of media:

<input type="checkbox"/>	Magazine	<input type="checkbox"/>	Website	<input type="checkbox"/>	Network TV or Cable
<input type="checkbox"/>	Newspaper	<input type="checkbox"/>	Radio		
<input type="checkbox"/>	Other _____				

Market: _____
(City, State, Region or Country)

Please email this form completed by April 1st, 2020 to:

Parade Committee – info@polishparade.org