



REQUEST FOR PRESS ACCREDITATION

APPLICATION FORM TO BE PRESENTED AT THE EXPO WITH YOUR PRESS CARD
Any request without press card won't be treated

First name : _____
Last name : _____
Media : _____
Function : _____
Press card number : _____
Expiration date : _____
Address : _____
Postcode : _____
City : _____
Country : _____
Phone : _____
Mobile phone : _____
E-mail : _____

Check the correct mentions:

Radio : National International
TV : National International
Press agency : National International
Press photographer : National International
Website : National International
Print media : National International
Periodicity : Daily paper Weekly Semimonthly Monthly Bimonthly
 Quarterly / other, specify : _____

Streetkrush® Kobaltstraat 15 5044JK Tilburg
+31655922115 / E-mail: gilbert@streetkrush.com / ty@streetkrush.com
www.streetkrush.com