



INTERNATIONAL MUSIC CONFERENCE

Press Credential Application
THE INTERNATIONAL MUSIC CONFERENCE 2015
Wednesday, September 16 – Sunday, September 20, 2015

Company Name:		
First & Last Name:		
Address:		
City:	State/Country:	Zip: (Post Code):
Telephone:	Email:	
Twitter:	Instagram:	
Outlet Type: (check one box only)		
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Magazine	<input type="checkbox"/> Newsletter
<input type="checkbox"/> TV	<input type="checkbox"/> Radio	<input type="checkbox"/> Photo Agency
<input type="checkbox"/> Website/Blog	<input type="checkbox"/> Newswire	
Briefly describe your intended type of coverage:		
Website Link:		

ALL PRESS MUST BE FOLLOWING US ON TWITTER, FACEBOOK & INSTAGRAM BEFORE APPLYING

TWITTER:	@theimctweets
FACEBOOK:	www.facebook.com/theinternationalmusicconference
INSTAGRAM:	@theimc



INTERNATIONAL MUSIC CONFERENCE

Press Credential Application
THE INTERNATIONAL MUSIC CONFERENCE 2015
Wednesday, September 16 – Sunday, September 20, 2015

Please complete a separate credential request box for each member of your outlet, and indicate his or her functions.
If you need additional credential request boxes, please print additional copies of this form.

CREDENTIAL REQUEST #1

First Name:		Last Name:	
<input type="checkbox"/> Print Reporter	<input type="checkbox"/> Online Reporter	<input type="checkbox"/> Still Photographer	
<input type="checkbox"/> Television / Video Crew	<input type="checkbox"/> Radio Producer / DJ	<input type="checkbox"/> Equipment Technician	

CREDENTIAL REQUEST #2

First Name:		Last Name:	
<input type="checkbox"/> Print Reporter	<input type="checkbox"/> Online Reporter	<input type="checkbox"/> Still Photographer	
<input type="checkbox"/> Television / Video Crew	<input type="checkbox"/> Radio Producer / DJ	<input type="checkbox"/> Equipment Technician	

CREDENTIAL REQUEST #3

First Name:		Last Name:	
<input type="checkbox"/> Print Reporter	<input type="checkbox"/> Online Reporter	<input type="checkbox"/> Still Photographer	
<input type="checkbox"/> Television / Video Crew	<input type="checkbox"/> Radio Producer / DJ	<input type="checkbox"/> Equipment Technician	

CREDENTIAL REQUEST #4

First Name:		Last Name:	
<input type="checkbox"/> Print Reporter	<input type="checkbox"/> Online Reporter	<input type="checkbox"/> Still Photographer	
<input type="checkbox"/> Television / Video Crew	<input type="checkbox"/> Radio Producer / DJ	<input type="checkbox"/> Equipment Technician	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand as a condition of receiving credentials to the International Music Conference 2015, I agree to send tear sheets or a copy of my coverage as soon as possible following the event. I also assert that I will act in a polite and professional manner at all times. Any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name and Date:

Signature:

Please complete, sign and email back to: info@thebridgepr.co.uk