

PRESS ACCREDITATION

Press

Agency: _____

Surname: _____

Name: _____

Tasks: _____

Email: _____ @ _____

I signed in and quality as above, when seeking accreditation to the event.

This completed form may be sent by mail / fax or delivered to the Race Office at the Alexander Hall of Cortina d'Ampezzo on days December 12th from 4:00pm to 8:00pm, December 13th from 3:00pm to 8:00pm and December 14th from 8.00am to 8.00pm; the withdrawal of the bib will be required deposit of € 20,00. It will be returned (Race Office open Sunday, December 15th from 8:00am to 11:00am) after delivery of the bib and verified the integrity of the same.

For acceptance, accreditation and receipt deposit Euro _____

Per Snowboard Club Cortina _____

I declare that the aforementioned deposit was returned on _____ and I have nothing to expect from the organization of the event.

Signature (readable) _____

