



PRESS ACCREDITATION FORM

(to send by fax nr. + 39 0736 344736 or by e-mail info@gsacoli.org)

DETAILS PERSONAL

Surname _____

Name _____

Address _____

PostCode _____

City _____

Prov. _____

State _____

Mobile phone _____

Phone / fax _____

E-mail _____

FUNCTION

JOURNALIST

PHOTOGRAPHER

JOURN./PHOTO

CAMERA MAN

PRESS OFFICER

RADIO MAKER

TEAM MANAGER

FREE LANCE

PUBLICATION

Publication's Name _____

Address _____

PostCode _____

City _____

Prov. _____

State _____

Mobile phone _____

Phone / fax _____

E-mail _____

MEDIA ACCREDITATION RULES

The acceptance of the accreditation request is subject to the approval of the organisers of every single event. Every request will be checked for its compliance with the conditions needed to issue the accreditation and, where needed, subject to the supervision of the relevant Sports Federation. Journalists, photographers and cameramen must produce the original accreditation request sent by a written or electronic Press Media, registered in their Country's office/register.

For organisation and safety purposes, every Media may request a maximum of 2 journalists and 2 photographers, Agencies and/or photo or video Companies a maximum of 4 people. Any other request will not be taken into account, except in those cases deemed as acceptable by the Press Office.

Ascoli Piceno, June 26th – 28th 2015

Signature _____

DECLARATION OF RESPONSIBILITY

The undersigned declares to be aware of the dangers which may arise in Motorsport events and in watching these ones along the route. He also declares to have the experience and the preparation to watch, in safety, during the events and to exert any caution to avoid physical and material injuries; to obey safety orders issued by Marshals and Police forces; to accept full responsibility for any damages he may suffer because of his lack of caution or experience. To relieve from any civil or legal responsibility the Organising Committee, the Clerk of the Course and any other person, Company or Association for all the above mentioned.

Ascoli Piceno, June 26th – 28th 2015

Signature _____

STATEMENT PRIVACY

I am aware that the information I have supplied is strictly confidential and authorize the use of the same as laid down by Italian Law (n. 675/96) for purposes related to this meeting and others.

Ascoli Piceno, June 26th – 28th 2015

Signature _____

Press room "54" Coppa Paolino Teodori"



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