

2019 Media Credential Application

Name		
	on	
Address to which credentials should be se	ent	
City, state, zip code		
		ell
Email		
	ou may designate only ONE primary	tographer, please designate the name of your pri- Photographer. A separate Media Credential appli-
Please check one	Please check one	Please check if you are

Please check one	Please check on	e	Please check if you are
Journalist	Newspaper	🖵 Radio	IAEJ Member
Photographer	Magazine	News Agency	Editor please check if this
Editor	Television	Website	is your primary photographer

I verify that I am an adult and that I am on assignment for ______

A letter of assignment on the assigning company's letteread is enclosed with this application.

PLEASE RETURN THIS APPLICATION WITH LETTER OF ASSIGNMENT NO LATER THAN JULY 18.

To: info@millbrookhorsetrials.com

Or: Credential Application • Millbrook Horse Trials • PO Box 893 • Millbrook, NY 12545