



## 2018 ACCREDITATION FORM

Complete in capital letters

Media Name	
Media Address	
Country	
Telephone	
E-mail	
Journalist #1 Name	
Mobile Telephone No	
Journalist #2 Name	
Mobile Telephone No	
Print Media Type	National [ ] Local [ ] Motor Cycle [ ] General Sport [ ] Specialist [ ]
Frequency	Weekly [ ] Monthly [ ] Other (Please Specify) [ ]
Other Media Type	Television [ ] Radio [ ] News Agency [ ] Internet Site [ ]

I do declare that I am fully indemnified and insured to act as a journalist within all sections of the 2016 MAXXIS FIM ENDUROGP and that my press card is up to date. I wholly agree, that in the event of any direct or indirect accident whatsoever, I will not hold responsible; The Promoter, The Organiser, any appointed member of their permanent or temporary staff or any other persons working under their immediate instruction. Consequently, I therefore agree that I will not seek to claim any damages whatsoever from any of the aforementioned parties in respect of any direct or indirect accident.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please fill in this form and send it by mail to [enduro.abc@orange.fr](mailto:enduro.abc@orange.fr)



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