



HANDBALL

WOMEN'S INTERNATIONAL CHAMPIONSHIP

ACCREDITATION

For the XVII Women's Handball World Championship

Personal details

Surname	Passport photo
First name	
Date of birth	
Place of birth	
Gender	
Address	
Street, Zip code, City, Country	
Tel. / Fax	
E-mail	
Clothes size	Smoker / Non-smoker

Professional details

Name of medium
Type of medium <input type="radio"/> Printed <input type="radio"/> Agency <input type="radio"/> TV <input type="radio"/> Radio <input type="radio"/> Internet <input type="radio"/> Technology
Address of medium
Street, Zip code, City, Country
Tel. / Fax
E-mail
AIPS number
National press association number
Date and place of arrival
Preferred location

Service

Telephone in press center	<input type="radio"/>	
Fax machine in press center	<input type="radio"/>	
Individual work station	<input type="radio"/>	(for a fee)
Laboratory / editing room	<input type="radio"/>	(for a fee)
VIP parking permit	<input type="radio"/>	(for a fee)
Parking permit	<input type="radio"/>	
Extras: <input type="radio"/> all inclusive offer <input type="radio"/> hotel <input type="radio"/> travel		

Comments	Signature 1: Company signature:
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Please fax the request at +7 (812) 326 55 43 or send it by e-mail at info@spbopen.ru



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