



MEDIA ACCREDITATION FORM

PLEASE WRITE IN BLOCK CAPITALS AND LEGIBLY ON ALL ITEMS. INCOMPLETE REQUESTS AND/OR ILLEGIBLE WILL NOT BE CONSIDERED.

ATTENTION- IMPORTANT

The mere sending of the accreditation request does not represent its acceptance by the press office in any case. If You do not receive communication of DENIAL, the request must be considered accepted. In any case, the refusal will be sent to the applicants within 24 hours before the start of the event with the express motivation.

SURNAME _____	JOURNAL - COMPANY _____
NAME _____	Address _____
Address _____	ZIP - City _____
ZIP - City _____	Tel. _____
Tel. _____ Fax _____	Email _____
Mobile _____ E-mail _____	Internet Site _____
Press Card n° _____	Contributor of _____
AIPS Card n° _____	Press Card n° _____
Other Card n° _____	Emergency FAMILY contact (name, parental status and telephone): _____ Telephone number _____

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

2- 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 members; 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.

3 -PERSONAL DATA TREATMENT (information according to GDPR 2018 and Italian Law D.Lgs 30/06/2003 n. 196 art. 13)

We hereby inform that the personal data provided will be used exclusively e for scopes purposes of archive and management of the Press Office activities of the events, in full respect of the person's rights.

SEND TO : gemini.consulting@yahoo.co.uk NO LATER THAN : SEPTEMBER,10 2023

THIS FORM MUST BE BROUGHT TO THE PRESS ROOM

FOR ACCREDITATION REQUEST AND ACCEPTANCE ALL PARAGRAPHS 1,2,3:

PLACE/DATE: _____ **LEGIBLE SIGNATURE:** _____