

Media & Photographer Credential Application



MEDIA OUTLET: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ Country (if not USA): _____

E-Mail: _____

Phone: (Office) _____ (Cell) _____ (Fax) _____

ASSIGNMENT APPROVAL:

Assignment Supervisor – Name: _____ Title: _____ Phone: _____

Click to check:

<input type="checkbox"/>	Daily Print*	<input type="checkbox"/>	Quarterly Print*	<input type="checkbox"/>	Radio	<input type="checkbox"/>	Wire Service
<input type="checkbox"/>	Weekly Print*	<input type="checkbox"/>	Network TV Station	<input type="checkbox"/>	Internet	<input type="checkbox"/>	Other (describe below)
<input type="checkbox"/>	Monthly Print*	<input type="checkbox"/>	Cable TV Station	<input type="checkbox"/>	Freelance	<input type="checkbox"/>	

*Print media - indicate circulation per issue: _____

Representatives Applying to be Credentialed

*List names and titles, then click to indicate media or photographer and to select specific dates requested.

Name (last, first)	Title	Media	Photog	Sat	Sun	Mon	Tue	Wed	Thur	Fri	Sat	Sun
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10
				2	3	4	5	6	7	8	9	10

Previously accredited: Yes No

*If yes, indicate year(s): 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010

TOURNAMENT SERVICES:

Would you like match schedules & daily results sent to you on a daily basis? *Yes No

*If yes: E-mail: _____

EQUIPMENT:

Writers: I need a private phone line.

On-Court Photo Credentials Mandatory:
 Please e-mail a JPG headshot of each **photographer**
 to Michael.Saia@familycirclecup.com

SUBMIT THIS FORM:

Complete application by:

1. Printing completed form
2. Fax to (843) 849-5392
3. Retain a copy for your records



Michael Saia - Communications Manager

Family Circle Cup • 161 Seven Farms Drive • Charleston, SC • 29492
 P: (843) 849-3153 • F: (843) 849-5392 • E: Michael.Saia@familycirclecup.com

*Be sure to submit this application before the **March 25th** deadline to be considered for approval.