

MEDIA REQUEST FORM

Name: _____

EVENT: _____

Publication/Media Outlet: _____

Ph: _____

Fx: _____

Email: _____

Website (if applicable): _____

Mailing Address: _____

Request (include # of credentials/review tickets you are requesting, will you need a photo/camera pass, Also please be specific about which artist(s)/athlete(s) you'd like to speak with):

Deadline: *MUST BE RECEIVED 5 DAYS PRIOR TO EACH EVENT DATE*

Availability (if requesting a phone interview, please state times you are available):

PLEASE FAX BACK TO 702.383.6603