



## Application for Credentials

Credentials Requested (Please check all that apply):

- Media    Videographer    Photographer    Television  
Photographer with Flash    Other

Applicant Name: \_\_\_\_\_

Title: \_\_\_\_\_

Publication/Media Outlet Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website Address (if applicable): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

I am on assignment for: \_\_\_\_\_

Please state where and when your work will appear: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*I have read all NRHA photography and video guidelines and agree to comply.*

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Printed name: \_\_\_\_\_

Please return to NRHA European Futurity Media Contact:

Simona Diale

internationalhorsepress@gmail.com