



## Press Accreditation Request Form

**Thank you for your interest in covering an AGOA CSO event.** Once your application has been processed our program director will review your credentials. You will then receive an email confirmation informing you whether or not we can accommodate your request. Due to the number of requests received, tickets are limited to one per outlet.

**REQUIREMENTS: PLEASE BRING A PHOTO ID, and COMPLETE Form below:.**

All data field items are required to be filled in.

First Name: \*

Last Name: \*

Your Personal Photo Head shot – JPEG, PNG or Tiff format Only

Company Name: \*

Your Supervisor's Name: \*

Your Supervisor's Title: \*

Your Supervisor's Phone: \*

Your Title/Position: \*

Your Phone: \*

Media Type: \*

Radio  Television  Newspaper  Web  Magazine

Frequency of publication or broadcast: \*

Weekly  Monthly  Bi-  
Monthly  Quarterly  Annual

Company Address (No P.O. Boxes)  
Line #1: \*

Company Address (No P.O. Boxes)  
Line #2: \*

City/Province: \*

State: \*

Zip: \*

Country: \*

Phone: \*

Company website: \*

Email: \*

Have you covered a FDA event before? \*  Yes  No

If yes, indicate dates and event titles:

Does applicant intend to conduct pre-promotion or post-promotion of this FDA event? \*  Yes  No

If yes, include specific details and attach documents: