

# Media Accreditation

Media Pass No.



**November 4 - November 18, 2012**  
**Adelaide, Australia**

Name: .....

Representing Media Organisation: .....

Position: .....

Editor / Administrator: .....

Address: .....

Country: .....

Website: .....

Telephone: ..... Fax: .....

Email: ..... Mobile: .....

**Please indicate which days accreditation is applied for (please circle applicable date):**

**Wednesday 7 November**  
National Teams SERC - State Aquatic Centre

**Tuesday 13 November**  
Interclub Pool - State Aquatic Centre

**Thursday 8 November**  
National Team Pool - State Aquatic Centre  
Masters Ocean - Christies Beach  
Masters Beach - Glenelg Beach

**Wednesday 14 November**  
Interclub Pool - State Aquatic Centre

**Friday 9 November**  
National Team Pool - State Aquatic Centre  
Masters Ocean - Christies Beach  
Masters Beach - Glenelg Beach

**Thursday 15 November**  
Interclub Pool - State Aquatic Centre  
Masters Surf Boats - Christies Beach

**Saturday 10 November**  
National Team Ocean - Glenelg Beach  
Masters Pool - State Aquatic Centre  
IRB Competition - Glenelg Beach

**Friday 16 November**  
Interclub Ocean - Christies Beach  
Interclub Beach - Glenelg Beach  
Open Surf Boats - Christies Beach

**Sunday 11 November**  
National Team Ocean - Glenelg Beach  
Masters Pool - State Aquatic Centre  
Long Distance Ski Race - Christies and Glenelg Beach  
IRB Competition - Glenelg Beach

**Saturday 17 November**  
Interclub Ocean - Christies Beach  
Interclub Beach - Glenelg Beach  
Open Surf Boats - Christies Beach

**Sunday 18 November**  
Interclub Ocean - Christies Beach  
Interclub Beach - Glenelg Beach  
Open Surf Boats - Christies Beach

**Applicant's Signature:** ..... **Date:** .....

In applying for accreditation for the Rescue 2012, Life Saving World Championships, I certify that any photographic images taken are for the purpose of reproduction in the above newspaper and in other newspapers subscribing to its syndications service. Images sold to readers will be sold on the basis that they are marked for personal consumption only and are not to be re-used commercially. Photographic images taken at the event will not be sold for commercial use without the express permission of this organisation.

**Director's Name:** ..... **Date:** .....

(please use stamp of organisation is applicable) In signing this application I certify that the above person is a professional working journalist/broadcaster/photographer whose work will be used only for the purposes specified.

**Director's Signature:** .....

Please do not sign this Accreditation Form if the above person is not a professional working journalist/broadcaster/photographer for your organisation.

Return completed form by Monday, October 1.  
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