|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MEDIA APPLICATION FORM** | | | | | | | **QUALIFYING ROUND ONLY** | | | | | | | | |
| **Personal Information** | | | | | | | | | | | | | | Please Affix Passport Photo Here | |
| * Handwritten forms **WILL NOT** be accepted | | | | | | | | | | | | | |
| * **COLOURED PASSPORT PHOTOGRAPH ONLY**. | | | | | | | | | | | | | |
| * Black and White Passport Photograph **WILL NOT** be accepted | | | | | | | | | | | | | |
| * Tick one (1) appropriate box only | | | | | | | | | | | | | |
| Full Name: | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Passport No.: | | | | | | | | Nationality: | | | | | | | |
| Name & Address of Media Organisation: | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| City: | | | | | | Postal Code: | | | | | State: | | | | |
| Country: | | | | | | Tel: | | | | | Fax: | | | | |
| Mobile: | | | | | | | | Email: | | | | | | | |
| Accreditation being sought for, will be issued at the respective venue selected :  (tick one appropriate box only) | | | | | | | | | | | | | | | |
|  | | Brunei DS |  | | Timor-Leste (Hosted by Malaysia) | | | | | | | | | | |
| Category of media organisation (tick one appropriate box only): | | | | | | | | | | | | | | | |
|  | Agency | |  | TV | | | |  | Website | | |  | Other (please specify) | | |
|  | Newspaper | |  | Radio | | | |  |  | | |  |  | | |
| Function (tick one appropriate box only): | | | | | | | | | | | | | | | |
|  | Journalist | |  | TV Reporter | | | |  | Cameraman | | |  | Other (please specify) | | |
|  | Photographer | |  | Radio Reporter | | | |  |  | | |  |  | | |
| All media seeking accreditation, including freelance journalists, **MUST PROVIDE** the contact name and phone number for their Commissioning Editor, Chief-of-Staff or Agency Director. | | | | | | | | | | | | | | | |
| Signature of applicant: | | | | | | Signature Commissioning Editor, Chief-of-Staff or Agency Director: | | | | | | | | | |
| Name: | | | | Position: | | | | | |
| Tel/Fax: | | | | Email: | | | | | |
| All media seeking accreditation **MUST OBTAIN** the signature of their respective Member Association.  **FORMS WITHOUT** the approval of the National Football Association **WILL NOT BE PROCESSED**. | | | | | | | | | | | | | | | |
| Approved by, | | | | | | | | National Football Association/Federation | | | | | | | |
| General Secretary  Date: | | | | | | | |
| All applications for LOCAL & INTERNATIONAL  **WRITTEN PRESS / PHOTOGRAPHERS / TV + RADIOS**  must be sent to the respective venue selected above. | | | | | | | | | | | | | | | |
| **DEADLINE FOR SUBMISSION OF APPLICATIONS:** | | | | | | | | **THURSDAY,**  **30 AUGUST 2018** | | | | | | | |
| **-For Office use only-** | | | | | | | | | | | | | | | |
| Date Received: | | | | | | | | **Approved** | | | **Reject** | | | | **Pending** |

|  |  |
| --- | --- |
| **LIST OF MEDIA DEPARTMENT EMAIL OF AFF**  **MEMBER ASSOCIATIONS** | |
| Brunei Darussalam | [secretariat@nfabd.org](mailto:secretariat@nfabd.org) |
| Timor-Leste (Host Malaysia) | [mediafam@gmail.com](mailto:mediafam@gmail.com) |
| Lagardere Sport Asia | [sg.broadcastservices@lagardere-se.com](mailto:sg.broadcastservices@lagardere-se.com) |