

## 2013 MEDIA ACCREDITATION REQUEST

| Applicant's Name:  |  |
|--|--|
| Applicant's Name:  |  |
| Affiliation:Address:   |  |
| Phone: email:  |  |
| Additional Staff/Titles:   |  |
| I am a <b>photographer</b> : YES □   |  |
| I will require: <b>Media Seating</b> YES #   |  |
| The Scotties Tournament of Hearts Media Hotel is the Four Points by for a standard room. Rooms are limited so please advise immed accommodation.   | •  |
| I require Hotel Accommodation arriving on departments  | arting   |
| Credit Card Number   | Expiry   |
| Yes, I would like to be met at the Airport: □  |  |
| Arriving flight # and time   |  |
| Departing flight # and time  |  |
| A media briefing will be held in the Media Room at K-Rock Centre at a February 16 <sup>th</sup> . Picture identification will be required. You can pick up the <b>Accreditation Office at the Volunteer Entrance at Gate 1 at the</b> time beginning at 9:00 a.m. on Friday, February 15 <sup>th</sup> . You'll be sent a to present at that time. Note: The K-Rock Centre is located at 1The Transcent of the time of the time is the time. | your accreditation at<br><b>K-Rock Centre</b> any notice of confirmation |
| PLEASE RETURN MEDIA ACCREDITATION APPLICATIONS BY Email: <a href="mailto:rwilson@curling.ca">rwilson@curling.ca</a> Fax: 1-604-983-  |  |
| I WILL BE NOT ATTEND BUT WOULD LIKE RESULTS/STATS A  | AFTER EACH DRAW  |
| Email  |  |