EAACI PRESS REGISTRATION FORM

**Please return this form to: EAACI Headquarters:** **communications@eaaci.org**

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| **EAACI Meeting Information** |
| **Name**of the EAACI meeting you want to register |
| **Date**of the EAACI meeting you want to register |

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| **Journalist Information** |
| **Name of Medium (e.g. journal, review, TV, radio)** |
| **Name** |
| **Last name** |
| **Address**(street name and number) |
| **Postal/zip code** |
| **City** |
| **Country** |
| **Email** |
| **Tel** |

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| **Accreditation Information** |  |
| **What are you applying for?** |  |
| **Free press pass**(if you are attending the meeting) | ☐ |
| **Press pack via email**(if you are not attending the meeting) | ☐ |
| **Your areas of interest** please specify |  |

If applicable, the **press centre** is only open to members of the working press. Identification will be required. Freelance journalists must also provide a letter from the commissioning editor. Please consult the EAACI Media and Embargo Policy for more information:

<http://www.eaaci.org/eaacimedia/eaaci-media-and-embargo-policy.html>

For **accommodation** please visit the participant section of the official EAACI event website [www.eaaci.org](http://www.eaaci.org/) to know more about hotels & flights.

**EAACI Headquarters** | Hagenholzstrasse 111, 3rd Floor, 8050 CH-Zurich | [**www.eaaci.org**](http://www.eaaci.org/)Page 1|1