



**MEDIA ACCREDITATION RENEWAL FORM**

(All renewal forms MUST be submitted at least one month before pass expiry date)

Name: \_\_\_\_\_

Agency/News Organisation: \_\_\_\_\_

Print  Radio  Television  Photography

Pass Number: \_\_\_\_\_

Date of Issue: \_\_\_\_\_

Date of Expiry: \_\_\_\_\_

Contact Address: \_\_\_\_\_

\_\_\_\_\_

Telephone No: \_\_\_\_\_

Mobile No: \_\_\_\_\_

Fax No: \_\_\_\_\_

Email: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_