



MEDIA CREDENTIAL APPLICATION

Event: 2009 FIVB World League _____

Dates: _____

Location: _____

Application Date: _____

Fax applications to B.J. Evans at (719) 228-6899 or e-mail to bj.evans@usav.org or mail to B.J. Evans at 715 S. Circle Dr. Colorado Springs, CO 80910. You will receive a confirmation of your credential application by fax or e-mail within one week of receipt. For more information about upcoming events, visit the USA Volleyball Web site at www.usavolleyball.org.

Date: _____ Name of Organization: _____

Name of Credentialed Party: _____

Position (circle one): WRITER WEB SITE REPORTER PHOTOGRAPHER
TV REPORTER TV CAMERAMAN RADIO REPORTER

E-mail: _____ Phone: _____

Type of Media Organization (circle one): NEWSPAPER MAGAZINE TELEVISION RADIO WEB SITE

Frequency of Publication (circle one): DAILY WEEKLY MONTHLY BI-MONTHLY

Publication Circulation / Viewership (circle one): BELOW 100,000 100,000-250,000 250,000-500,000 ABOVE 500,000

Type of Programming (for broadcast): _____ Rank in Market: _____

Last USA Volleyball event covered: _____

Editor's Name: _____

Editor's Phone: _____

Editor's E-mail: _____

Editor's Fax: _____

Send Credentialing and Event Information via E-mail to (circle one): EDITOR CREDENTIALLED PARTY BOTH

Would you like to be added to USA Volleyball's press release e-mail list? YES NO

Any special needs / requests? _____

OFFICIAL USE OF USA VOLLEYBALL ONLY

DATE RECEIVED: _____

STATUS: _____