

AAU Junior Olympic Games MEDIA CREDENTIAL REQUEST FORM



PLEASE PROVIDE CONTACT INFO

Circle Type of Outlet:	Print	Radio	Online	TV	Photo
Name of Outlet:					
Circulation / MAUs / View	ers / Listen	ers:			
First Name:			Last Name:		
Phone:			_		
Email:					
Website:			•		
Sports Attending:					
PLEASE SPECIFY YOUR	CREDENTI	AL REQU	ESTS (4) Maximum		
Full Names (Please include	de all)				
				- -	
				=	
				-	
Please summarize your c	overage pla	ans:			

SEND THIS FORM (and copy of media credentials) VIA EMAIL TO: jmallard@aausports.org

PLEASE NOTE: Credential requests must be received by July 19, 2019. No credential requests will be accepted late or on site.