

ASSEMBLY OF STATES PARTIES – SECRETARIAT

REVIEW CONFERENCE - ASSEMBLY OF STATES PARTIES TO THE ROME STATUTE OF THE INTERNATIONAL CRIMINAL COURT Kampala, Uganda 31 May – 11 June 2010			
REQUEST FOR ACCREDITATION OF MEDIA REPRESENTATIVES			
PERSONAL DATA			
1. Name: <div style="display: flex; justify-content: space-around; margin-top: 5px;"> (Family name) (First name) </div>			
2. Place and date of birth:			
3. Nationality: _____ 4. Passport number: _____			
5. Permanent office address <i>(if different from your organisation's headquarters):</i>			
6. Telephone: Fax:		Mobile: E-mail:	
DATA ON THE MEDIA ORGANISATION YOU REPRESENT			
7. Name of organisation:			
8. Contact person and title:			
9. Headquarters mailing address:		Telephone: Fax: Web site:	
10. Status/Ownership: <input type="checkbox"/> Educational/Public <input type="checkbox"/> Private		<input type="checkbox"/> Government/State <input type="checkbox"/> Other (specify)	
11. Type of medium <i>(check as many as necessary):</i> <input type="checkbox"/> Daily newspaper <input type="checkbox"/> News agency/service	<input type="checkbox"/> Photo/visual service <input type="checkbox"/> Radio <input type="checkbox"/> Television	<input type="checkbox"/> Weekly publication <input type="checkbox"/> Other (specify):	
12. Position: <input type="checkbox"/> Cameraperson <input type="checkbox"/> Correspondent	<input type="checkbox"/> Director <input type="checkbox"/> Editor	<input type="checkbox"/> Photographer <input type="checkbox"/> Producer	<input type="checkbox"/> Reporter <input type="checkbox"/> Technician <input type="checkbox"/> Other (specify)
13. Working language(s) of your media organisation:			

Please send this form to the Secretariat of the Assembly of States Parties, International Criminal Court, via fax : +31 (0)70 381 54 76 or via e-mail to : asp@icc-cpi.int.