



Media Registration Application

Taste of Fort Collins | June 9th – 11th, 2017

Please complete one application per person, including electronic crew members

You will be notified of your accreditation status and approved ticket requests by: June 2nd, 2017

CONTACT INFORMATION

NAME: _____

TITLE: _____ COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____

EMAIL: _____

PUBLICATION/OUTLET INFORMATION

PRINT

Primary Publication/Outlet: _____

Form (please circle): NEWSPAPER MAGAZINE

Frequency (please circle): Daily Weekly Bi-Weekly Monthly Quarterly Other

Distribution (please circle): Regional National International

Circulation: _____

Anticipated print date: _____

TELEVISION

Distribution (please circle): Regional National International

Call Letters: _____

Network: _____

Program Name: _____

Anticipated Air Date: _____



Media Registration Application

RADIO

Distribution (please circle): Regional National International

Call Letters: _____

Program Name: _____

Anticipated air date: _____

ONLINE | BLOGS

URL: _____

Hits per month: _____

Editor/Producer: _____

Telephone: _____

Additional Publication/Outlet: _____

Market: _____

TYPE OF COVERAGE

Briefly Describe Stories and Length of Coverage

AS A CONDITION OF RECEIVING TASTE OF FORT COLLINS PRESS TICKETS, I AGREE TO SEND TEAR SHEETS OR A COPY OF MY COVERAGE AS SOON AS POSSIBLE FOLLOWING THE EVENT.

Applicant's Signature: _____ Date: _____

Please Return this form by MAY 19th, 2017 by emailing it to:

Courtney Mamuschia, Reflexion Media at courtney@reflexionmedia.com

IMPORTANT

You will be notified of your accreditation status by June 2nd, 2017 for the Taste of Fort Collins. Confirmation will be sent electronically, please note that emails do not always go through and we cannot guarantee you will receive these emails. It is the responsibility of the applicant to follow-up with the press office to ensure they receive information regarding their press status.