2026 SMP Media Access Form

NAME: _____

MAILING ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

EMAIL: _____

MOBILE#: _____ ____

Journalist ____ Photographer ____ Videographer ____ Radio Media _____ Other _____

Organization/Publication: _____

Website:_____

Name of Editor: _____

Phone: _____

What do you do with your photos?_____

Social Media page names:_____

Notable events you have published for: _____
_____

Notable events you have provided media for:_____
_____

PRINT NAME (PASS HOLDER)_____

DATE: _____

SIGN (PASS HOLDER) _____

DATE: _____

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