



## ACCREDITATION FORM - PRESS

### PERSONAL INFO

Name:

Surname:

City:

Country:

Contact phone:

Fax:

E-mail:

URL:

### MEDIA

Radio:

Television:

Newspapers / Magazine:

Internet:

Other:

Fill out the form and send it by September 12<sup>th</sup> 2024 via e-mail to:  
[hospitality@25fps.hr](mailto:hospitality@25fps.hr).