



ANNEX I

MEETINGS OF FOREIGN MINISTERS

MADRID, SPAIN, 3–4 JUNE 2003

REQUEST FOR ACCREDITATION

Note: Please type or use block letters

Family Name : ☐ Male ☐ Female
First Name :
Date of Birth: Day / Month / Year / Place
Address :
Phone No. Prior to meetings: Fax No. Prior to meetings:
E-mail address : Mobile Phone Number :
Nationality : Passport No. : Issued by :
Press Card No. : Issued by:

(Tick where appropriate)

(Tick where appropriate)

<input type="checkbox"/> News Agency	<input type="checkbox"/> Television
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Radio
<input type="checkbox"/> Magazine	<input type="checkbox"/> Photo Agency

<input type="checkbox"/> Journalist	<input type="checkbox"/> Photographer
<input type="checkbox"/> Producer	<input type="checkbox"/> Technician
<input type="checkbox"/> Cameraman	<input type="checkbox"/> Other

Name of Media Organization :
Home Country of Media Organization
I agree to the above mentioned data being stored and used in connection with my accreditation.

Date :2003 Signature :

→ →

**PLEASE RETURN BEFORE 23 MAY 2003 WITH A PHOTOGRAPH
FORMAT JPG**