



## Accreditation form

### Personal information:

Name :	First Name :	
Company :		
Street :		No :
Post code :	City :	Country :
Tel :	Fax :	
Internet :	Email :	

### Magazines/newspapers covered:

-	-
-	-
-	-
-	-
-	-
-	-

### Attendance days : (circle your choice)

Wednesday, 8 December:	YES	NO
Thursday, 9 December:	YES	NO
Friday, 10 December:	YES	NO

Please, send us a copy of your press card, by email at [info@3dstereomedia.eu](mailto:info@3dstereomedia.eu), or by fax at +32 (0)4 254 97 98.