



MEDIA ACCREDITATION 2018

Media Type:

- Daily Newspaper
- Community Newspaper
- Weekly Magazine
- Monthly Magazine
- Television
- Radio
- Website/Blog
- Facebook Page

| | |
|--|--|
| Organization Name | |
| Address | |
| City | |
| State/Province | |
| Postal/Zip | |
| Phone | |
| Website | |
| Publication Information (ie. circulation, unique monthly visitors, etc.) | |

| | |
|----------------------|--|
| Personal Information | |
| First/Last Name | |
| Position | |
| Work Phone | |
| Email | |

Have you ever covered a Comic Con before?

- Yes
- No

If yes, please provide a description of coverage provided, in the space below.

Submit completed forms via fax 1-888-334-9369 or
via email info@niagarafallscomiccon.com