



Box 2812, ROCKY MOUNTAIN HOUSE, ALBERTA CANADA T4T 1L7 PHONE: (403) 322-0034

ROCKY MOUNTAIN HOUSE AIR SHOW
August 11th, 2010
MEDIA ACCREDITATION REQUEST FORM

MEDIA COMPANY INFORMATION: (credential package will be mailed to this address)

Media Company Name: _____

Contact Name: _____ Position: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Phone Number: _____ Fax: _____ Email: _____

DAYS ATTENDING: I would like to attend the Air Show as a Media Representative on:

Tuesday, August 10th (Media Day): **YES** **NO**

Wednesday, August 11th (Air Show): **YES** **NO**

WAIVER AND INDEMNITY 2010

I, the undersigned, in consideration of the approval of the Rocky Mountain House Airshow Society of my participation in the 2010 Rocky Mountain House Air Show as press, photographer, journalist, HEREBY INDEMNIFY AND SAVE HARMLESS the Rocky Mountain House Airshow Society, its servants or agents, its directors, underwriters, sponsors, producers or officials, AND the Ministry of Transport, its servants or agents of and from all manner of actions, causes of action, debts, sums of money, claims and demands whatsoever arising out of any and all damage to persons or property caused by me, my servants or agents while using the Rocky Mountain House Airport, Rocky Mountain House, Alberta, or any facilities thereof or while operating an automobile in or about the said airport.

I, the undersigned, on behalf of myself, my heirs, executors and administrators, HEREBY RELEASE AND FOREVER DISCHARGE the Rocky Mountain House Airshow Society, its servants or agents, its directors, underwriters, sponsors, producers and officials, AND the Ministry of Transport, its servants or agents, of and from all manner of actions, sums of money, claims or demands whatsoever which I, operated by me for any personal injury I may sustain, howsoever caused, arising out of my participation in the 2010 Rocky Mountain House Air Show.

MEDIA REPRESENTATIVE ATTENDING:

Name: _____ Signature: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

MEDIA REPRESENTATIVE ATTENDING:

Name: _____ Signature: _____

Address: _____ City: _____

Province: _____ Postal Code: _____

ROCKY MOUNTAIN HOUSE AIR SHOW SOCIETY

Box 6, Site 26, RR 2
Rocky Mountain House, Alberta
T4T 2A2

Fax: (403)845-2623
Email: wendy@rockymtnhouseairshow.com
Website: www.rockymtnhouseairshow.com

**Media credentials will be extended only to media on assignment.
No children or other family members will be admitted to the
media area.**

**Credential assignments are subject to the approval of the
Rocky Mountain House Air Show Media Director.
Credentials are non-transferable. Any violation of this will
result in revocation of credentials.**

**All Media Credentials will be mailed out and will not be distributed
on-site at the Air Show.**

**All credential requests must be submitted on or before
Wednesday July 28, 2010, 12:00PM.**