

SHARK FIGHT PROMOTIONS, LLC



MEDIA CREDENTIAL APPLICATION

APPLICATION DEADLINE: 2 WEEKS PRIOR TO THE EVENT

..... PLEASE PRINT LEGIBLY - COMPLETE ONE (1) FORM FOR EACH INDIVIDUAL

Shark Fights Event _____

Last Name _____ First Name _____ Title _____

Publication or Affiliation _____

Street Address _____

City _____ State _____ ZIP Code _____

Phone Number _____ E-mail _____ Country _____

A FAX number or an E-mail address is required to receive a credential confirmation

Please be sure to list a phone number, fax number or E-mail address that you check regularly. Thank you.

PLEASE SELECT ONLY ONE CATEGORY

PRINT

PHOTOGRAPHY

BROADCAST

INTERNET

CONFIRMATIONS

For consideration, a letter of assignment signed by your sports editor or news director on company letterhead or from a company E-mail domain must be received **no later than 2 weeks prior to the event**. Thank you.

Please FAX or E-mail completed application to:

Novuss Media, Inc.

Phone: (480) 361-5719

FAX: (480) 361-5732

E-mail: media@novussmedia.com