



**Bromont CCI**  
Three Day Event

## MEDIA ACCREDITATION FORM - 2017

PRESS ORGANIZATION INFORMATION	
Name of Organization	
City/Province – City/State, Country	
Postal Code / Zip Code	
Telephone Number	
Fax Number	
Web Site Address	
ACCREDITED REPRESENTATIVE INFO	
Name	
Title	
Telephone Number (Cell)	
Fax Number	
Email Address	

Please return the completed form by email to: Diane Hamelin  
[diane.hamelin@hamelin-martineau.ca](mailto:diane.hamelin@hamelin-martineau.ca)