|  |  |  |
| --- | --- | --- |
| Telephone: (+268) 2405 – 4000 Fax: (+268) 2404 1898dubephe@gov.sz |   KINGDOM OF ESWATINI | Ministry of Information Communications & Technology P.O. Box 642MBABANEESWATINI |

PASSPORT SIZE

 PHOTO

 APPLICATION FOR MEDIA ACCREDITATION

 MTN Bushfire Festival

 (26TH-28TH MAY 2023)

|  |  |
| --- | --- |
| ***SURNAME*** |  |
| ***FULL NAME*** |  |
| ***DATE OF BIRTH*** |  | ***PLACE OF BIRTH*** |  |
| ***COUNTRY OF BIRTH*** |  | ***NATIONALITY*** |  |
| ***PASSPORT NO:*** |  | ***DATE OF ISSUE*** |  |
| ***PLACE OF ISSUE*** |  | ***COUNTRY OF ISSUE*** |  |
| ***NATIONAL ID*** |  | ***DATE OF EXPIRY*** |  |

|  |  |
| --- | --- |
| ***MAILING ADDRESS*** |  |
| ***PHYSICAL ADDRESS*** |  |
|  |
| ***TELEPHONE (WORK)*** |  | ***HOME*** |  |
| ***CELL*** |  |
| ***FAX*** |  |
| ***EMAIL*** |  |

|  |  |  |
| --- | --- | --- |
| ***ORGANISATION***  |  |  ***FOR OFFICIAL USE******Signature:…………………………….******Date:…………………………..……...******Stamp*** |
| ***DESIGNATION*** |  |
| ***DATE OF ARRIVAL IN SWAZILAND*** |  |
| ***PLACE OF ENTRY/ BORDER POST*** |  |
| ***NAME OF HOTEL/LODGE*** |  |

**SIGNATURES: Applicant …………………… Supervisor/Editor………………….. Date…………………….**

**REQUIREMENTS**

* *Full background of organization with letterhead*
* *Contact details of organization*
* *Objective of exercise*
* *Designation / role of each crew member*
* *Copy of ID or passport (Inner – Back Page)*
* *2 Passport size photos of each crew member*
* *List and specify all equipment to be used (for Customs purposes)*

***The application period closes 28th April 2023.***

*Applications should be emailed as a scanned document in JPEG or PDF* *format to:* *communications@bush-fire.com* *for forwarding to the Ministry of Information, Communications and Technology.*

*Please visit* [*https://www.bush-fire.com/press-accreditation/*](https://www.bush-fire.com/press-accreditation/) *for more details or email* *communications@bush-fire.com* *for queries.*