Jackson Hole Snow Devils
Hosts of the World Championship Snowmobile HillClimb

MEDIA CREDENTIAL REQUEST

The Jackson Hole Snow Devils (JHSD) welcomes the media. It is our goal to make your job covering the ***2018 World Championship Snowmobile Hill Climb*** event as easy as possible. To obtain media credentials, please note the following information:

Please have your Editor/Director issue a letter of assignment produced on original company stationery. Additionally, complete the form below and attach to your letter of assignment. Please FAX this form and letter to (307) 734-9653 or email to mail@snowdevils.org no later than fifteen (15) days prior to the race weekend.

SUBMITTING THIS REQUEST DOES NOT GUARANTEE YOU WILL RECEIVE OR BE GRANTED A MEDIA CREDENTIAL OR ACCESS TO THE EVENT. YOU WILL RECEIVE A FOLLOW-UP CONFIRMATION PRIOR TO THE RACE.

Name:_____Company you Represent: _____
Website:_____Address: _____
City:_____State/Province:_____Zip:_____
Email:_____Daytime Phone:_____Cell Phone:_____

Primary Job Function:
Radio Broadcast Journalist
Publication Photographer
Independent Videographer
TV/Broadcast Journalist
Independent Photographer for race team or OEM
Other:

Please provide the name and address of the media company(s) you are representing:

Name: _____ Website: _____
Address: _____ City: _____
State/Province: _____ Zip: _____
Daytime Phone: _____ Fax: _____
Name of Editor or Director: _____

PLEASE NOTE: Credentials will not be issued without the formal approval of your Editor/Director. Issuance of this credential is at the sole discretion of the JHSD. ONLY ONE CREDENTIAL MAY BE ISSUED PER REQUEST.

To be granted media access, proof of General Liability insurance is required and the Jackson Hole Snow Devils, Bridger-Teton National Forest, Town of Jackson, and Snow King Resort must be listed as an additional insured. In addition, the medical information below is required and all insurance information and copies must be submitted via FAX or email to the number or address above with this request form. There will be a $100 charge for a media pass.

Medical Insurance Carrier:_____Medical Ins. Number: _____
Know reactions or allergies to medications: _____
Emergency Contact: _____Phone Number: _____

I agree to the following terms:

- ☐ Any photos/videos taken by me at this event will be used in the performance of my duties/responsibilities with the company listed above and will not be resold without prior written permission from the JHSD.
- ☐ I agree to wear a JHSD media vest and media pass at all time while in the track area and will return them at the conclusion of the event.
- ☐ I agree that should I not return the JHSD media vest and media pass at the conclusion of the event, I will be charged $100 for them.
- ☐ I agree to comply with any/all instructions given to me by the race officials.
- ☐ I agree to sign the Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement.
- ☐ I agree to reference the JHSD, Snow King Resort, and Bridger-Teton National Forest in all printed and aired work as a result of my assignment.
- ☐ I agree to provide the JHSD with two (2) copies of the work published, aired, or printed as a result of my assignment via hard copy or email.

Digital Signature: Date: