CIVILIAN MARKSMANSHIP PROGRAM MEDIA CREDENTIAL APPLICATION

Qualified journalists (editors, reporters, bloggers, book authors, producers, video camera crews, and/or photographers) wishing to cover or report any event or activity sponsored by or conducted on the premises of the Civilian Marksmanship Program must apply for CMP Media Credentials.

An application must be completed for each media staffer regardless of whether the staffers are from the same media outlet. A new application must be completed for each event covered. Applicants who have covered past CMP events or activities may be asked for copies of work published, posted or shown. The time for processing applications is not always immediate, and may take up to two weeks. Past issuance of media credentials does not guarantee approval for media credentials. The Civilian Marksmanship Program reserves the right to accept, revoke, or deny media credentials. Credentials must be obtained at the check-in area of the specific venue for the event. Credentials are not transferrable and will be confiscated by CMP personnel if abused. Each applicant must agree to the CMP news media policy attached to this application.

CONTACT INFORMATION

Name:_________________________________________________  
Title:_________________________________________________  
Address:______________________________________________  
City:___________________________ State:____________________ Postal Code:_________  
Telephone:___________________________ Email:____________________________________  
Name of event to be covered:___________________________________________________  
Date of event to be covered:___________________________________________________  

COMPANY INFORMATION

Company Name:________________________________________________________________  
Media Type:____________________________________________________________________  
Telephone:_____________________________________________________________________  
Address (if different from above):________________________________________________  
City:_______________________________ State: ___________________ Postal Code: _______  

_________________________________________________  
Applicant’s Signature      Date