

## AKREDITATION FORM

|  |  |
| --- | --- |
| *PERSONAL DATA* |  |
| Name and surname |  |
| Date of birth |  |
| Phone number |  |
| Email address |  |
|  |  |
| *MEDIA* |  |
| Name |  |
| Type of media |  |
| Address  |  |
| State  |  |
|  |  |
| *REQUIREMENTS* |  |
| Phone |  |
| Internet |  |
| Electrical connection |  |
| Other |  |
|  |  |
| *ACCOMMODATION* |  |
| Bed |  |
| Bed &breakfast |  |
| Half-board |  |
| Full-board |  |
| Program for accompanying family |  |

Please send filled form to: info@ljubno-skoki.si, or:

SSK Ljubno BTC

Plac 2

SI - 3333 Ljubno ob Savinji

Slovenia

Deadline submission**: Sunday, 8. February 2015!**