



Miami-Dade County Fair & Exposition Media Credential Application

In order for The Fair to issue media credentials, please fill out the following information and return to us promptly via fax or e-mail. The information provided will be verified.

First Name: _____ Last Name: _____

Name of media outlet you represent: _____

Are you a permanent employee of this media outlet or a freelancer: _____

If a freelancer, please specify name of editor who assigned story: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: _____ Alternative Number: _____

Fax: _____ E-mail: _____

When are you looking to visit The Fair: _____

Will you be taking photos or video, if so, of what: _____

What is the angle for your story: _____

When will the story be published or aired: _____

If you have any questions or for press materials, please contact:

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