

THE ELEGANCE AT HERSHEY

2016 Media Credential Request Form

Name: _____

Media Organization Name: _____

Your Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone: _____ Cell#: _____

Media Type: Print ___ TV ___ Radio ___ Blog ___ Photos _____

Have you covered the Elegance at Hershey in the past? Yes ___ No ___

Are you willing to share your work with The Elegance At Hershey for our use in publicity, advertising, etc.? We will credit you as the source when using your product. Yes ___ No ___

By submission of this form I certify I have read and accept the terms of the following Release of Liability provision. In consideration of the acceptance of this Media Credential Request Form by The Elegance at Hershey representative, I hereby: (1) Release The Elegance at Hershey Corporation, and its committees, staff, directors, volunteers, and agents from any and all liability arising out of or related to said event; (2) Release all other participants and officials from any and all liability arising out of or related to said event; (3) Release and hold harmless The Hotel Hershey and Hershey Resorts and Entertainment Corporation from any and all liability arising out of or related to said event; (4) I also agree to abide by the rules of The Elegance at Hershey while on its premises.

Signature: _____ Date: _____

Issued credentials will not be mailed. They may be picked up at the Elegance Concierge Desk at the Hotel Hershey beginning Noon 6/9/16. Rejected requestors will be notified within 72 hours of receipt of the Request Form. If you do not receive notification consider your application approved. Please return this Request Form by fax to 717-534-9101 or scan and email to don@theeleganceat Hershey.com or mail to The Elegance at Hershey, 501 W. Governor Rd., Hershey, PA 17033 Attn: Don Stabilito