For Internal Use Only:

☐ **Recorded** ☐ **Background Check is Complete** ☐ **Request Approved** ☐ **Credential Received** **Assignment: L: _____ V: _____ Photo: _____**

2012 LITTLE LEAGUE BASEBALL WORLD SERIES MEDIA REGISTRATION FORM

- All spaces on this form must be filled, and the form returned electronically, by fax or standard mail to Little League International. Only completed credential requests, signed by the requestor, will be processed.
- As part of the confirmation process, the requestor's specific personal information (full name, including middle name; social security number; home address) must be included on the form for the purpose of conducting a standard criminal background check. No credentials will be issued until the background check is completed.
- The authorizing supervisor will be notified, and the media credentials issued, pending the result of the background check.
- Media credentials are not transferable. No media credential will be issued to anyone under 18, or who has not consented to a standard criminal background check.
- The information will not be shared with anyone outside of Little League International except for the purposes of ensuring the security of Little League Baseball World Series participants.
- One form must be completed for EACH individual requesting credentials to cover the Little League Baseball World Series.
- NOTE 1: Freelance journalists also are welcome to cover the Little League Baseball World Series. However, due to limited space in the media press areas, these credential requests may be denied. If a freelance journalist does wish to cover the Little League Baseball World Series, an editor for an established news organization must make the assignment and must be named on Line 12.

PLEASE TYPE OR PRINT CLEARLY

1. Full name of person who will be covering the World Series: _____
   (First, Middle, Last)

2. This person will be primarily concerned with: (check one)

   ☐ Print Media ☐ Still Photography ☐ TV ☐ Radio Broadcasting
   Seat Requested: ☐

   Check here if your organization is requesting parking for a satellite truck or other similar vehicle on the complex: ☐

   NOTE: SPACE IN THE PRESS SECTION IS LIMITED. SEATS IN THE PRESS SECTION ARE AVAILABLE FOR WORKING PRINT MEDIA ONLY. TELEPHONE JACKS ARE PROVIDED BY LITTLE LEAGUE UPON REQUEST WITH LOCAL ACCESS AT NO CHARGE. TOLL CALLS MUST BE COLLECT OR MADE WITH A CREDIT/CALLING CARD. YOU MUST SUPPLY YOUR OWN TELEPHONE. PHOTOGRAPHERS CAN NOT REQUEST SEATS IN THE PRESS BOX.

3. Social Security Number: _____ (Required) Birth Date: _____ (Required)

4. Name of media organization making this assignment: _____

5. Home address of person named on Line 1: _____

6. Business address of person named on Line 1: _____

7. Daytime phone of person named on Line 1: _____

8. Nighttime phone of person named on Line 1: _____

9. Fax number of person named on Line 1: _____

10. E-mail address of person named on Line 1: _____

11. Date on which the person in Line 1 will arrive in Williamsport: _____

12. Name and title of the person (editor, news director, etc) assigning coverage of the Little League Baseball World Series to the person named on Line 1: ***(MUST* BE DIFFERENT FROM THE NAME ON LINE 1)**

____ Assignment Confirmed

_____

13. Full mailing address of the person named in Line 12: _____

14. Daytime phone number of the person named in Line 12: _____

15. Nighttime phone number of the person named in Line 12: _____

16. Fax number of the person named in Line 12: _____

17. E-mail address of the person named in Line 12: _____

BY SIGNING THIS FORM, I GRANT PERMISSION TO LITTLE LEAGUE INTERNATIONAL TO PERFORM A STANDARD CRIMINAL BACKGROUND CHECK. _____

Little League International
World Series Media Guidelines Acknowledgement and Agreement

I _____, of _____, hereby agree to all guidelines and procedures regarding the working media attending the Little League Baseball World Series in Williamsport, Pa., as granted by Little League International, and as stated in the 2012 Little League Baseball World Series Media Guide. I understand and agree that the credential issued to me, following the completion of a required standard criminal background check, is the property of Little League International. I understand that I, or any representative and/or associate of the aforementioned media outlet, am subject to immediate revocation of World Series media credential(s) upon discovery of violations(s) of these guidelines.

Submit this completed form to:

Little League Baseball World Series Media Office
Attn: World Series Media Credentials
539 US Route 15 Hwy
P.O. Box 3485
Williamsport, PA 17701

Or e-mail pdf file to: wsmedia@LittleLeague.org

Or fax to: **570-601-0115**