

# APDW 2016 Media Guidelines

November 2-5, 2016

1. **Journalists are requested to follow the directions by the conference organizers.**
2. **Present your business card to the receptionist and receive your press pass. If you do not have a business card, you will not be allowed to enter. In general, you will also be required to present your employee ID card.**
3. **Journalists are requested to wear a press badge all the time.**
4. **Flash photography/filming are NOT permitted during any of the sessions.**
5. **Photography/filming are permitted only for the purpose of press coverage and only when presenters give permission.**
6. **Any photography/filming are NOT permitted if it has a risk of breaching copyrights and personal information.**
7. **Kindly turn off your cell phone or turn it to vibration/silent mode during the sessions and refrain from talking on the phone.**
8. **Interviews of any individual participant without appointment are NOT permitted during the conference.**
9. **Journalists are requested to inform secretariat of APDW2016 when date of broadcasting / publishing / posting are fixed. It would be highly appreciated if you donate one copy of broadcast program / publication or post coverage to secretariat of APDW2016.**

## **【Congress Secretariat of APDW 2016】**

### **●Before/ After the conference**

c/o Japan Convention Services, Inc.,

Daido Seimei Kasumigaseki Bldg. 14F, 1-4-2 Kasumigaseki, Chiyodaku, Tokyo 100-0013, Japan

E-mail: [apdw2016@convention.co.jp](mailto:apdw2016@convention.co.jp)

**Business Card or Passport Copy**

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**APDW 2016**

**Application for Press Accreditation**

**◆ Applicant Information**

**First Name :** \_\_\_\_\_ **/ Surname :** \_\_\_\_\_

**Nationality:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Name of Media Organization:** \_\_\_\_\_

**Media Outlet:** ✓ the applicable box.

**Journal**    **TV/Film**    **Newspaper**    **Internet**    **Radio**

**Other (specify)** \_\_\_\_\_

**Hotel Name in Japan:** \_\_\_\_\_

**◆ Coverage Information**

**Name of Intended Interviewee (If any)** \_\_\_\_\_

**Appointment with Interviewee (If Any):**

**Time**                      **Date**                      **Month**                      **Year**

**Aim of Coverage:** \_\_\_\_\_

**Name of Intended Program to Cover(If Any):** \_\_\_\_\_

**Method of Coverage:** ✓ the applicable box.

**Photo**       **Filming**       **Voice Recording**

**Other (specify)** \_\_\_\_\_

**Expected Date of Broadcasting, Post, or Publishing**

**Name of Media:** \_\_\_\_\_

**Date**                      **Month**                      **Year**