



2025 MEDIA CREDENTIAL REQUEST

Applicant's Name: _____ Cell Phone: _____

Address: _____

Email: _____

Media Outlet: _____ Phone: _____

____ Writer ____ Photographer ____ Videographer ____ Other

If other, please explain: _____

Freelance applications will not be considered unless you have proof of an assignment from an approved media organization. PLEASE REVIEW THE MEDIA CREDENTIAL REQUEST POLICY posted on the Weedsport Speedway website.

Facebook Account Name: _____

X (formerly Twitter) Account Name: _____

Emergency Contact Name & Phone Number: _____

Please indicate those events for which you are requesting a media credential. Each event will be reviewed separately, and you will receive a separate notice of approval or denial for each.

- | | |
|---|---|
| <input type="checkbox"/> May 4 Ice Breaker 50 | <input type="checkbox"/> July 26 Hall of Fame 100 |
| <input type="checkbox"/> May 25 Heroes Remembered 100 | <input type="checkbox"/> July 27 Empire State Challenge |
| <input type="checkbox"/> July 6 ESS Speedweek Finale | <input type="checkbox"/> August 17 SummerFAST |
| | <input type="checkbox"/> September 6 Cavalcade Cup |

CODE OF CONDUCT: the applicant agrees to always conduct themselves professionally while attending Weedsport Speedway or representing the above media outlet in all forms of communication. Failure to do so will result in the immediate removal of credentials at Weedsport Speedway per the discretion of management. With my signature below I certify I have read and fully understand the Weedsport Speedway Media Guidelines.

APPLICANT'S SIGNATURE _____ DATE _____

PLEASE E-MAIL COMPLETED FORM TO: credentials@weedsportspeedway.com