



ECBACC, INC. PRESS CREDENTIAL IDENTIFICATION

**East Coast Black Age of Comics Convention
EXHIBITION DATE: Saturday, MAY 17, 2025
Philadelphia, Pennsylvania**

PLEASE PRINT OR TYPE – Illegible entries will not be considered.

First Name:	
Last Name:	
Company Name:	
Street Address:	
City, State, Zip:	
Phone Number:	
E-Mail Address:	
Website:	
Twitter:	
Facebook:	
Instagram:	
Type of Media: (indicate primary one, only)	<input type="checkbox"/> Internet <input type="checkbox"/> Newspaper <input type="checkbox"/> TV (Cable) <input type="checkbox"/> Magazine <input type="checkbox"/> Newswire <input type="checkbox"/> TV (Regional/National) <input type="checkbox"/> Newsletter <input type="checkbox"/> Radio
Job Title / Primary Responsibility: (indicate primary one, only)	<input type="checkbox"/> Editor <input type="checkbox"/> Publisher <input type="checkbox"/> Other: <input type="checkbox"/> Photographer <input type="checkbox"/> Reporter _____ <input type="checkbox"/> Producer <input type="checkbox"/> Writer _____

Complete the Press Credential Application and submit it with all required information. All applications must be submitted to a convention organizer for review and badge receipt. Forms must be completed in person at the Saturday convention.