



Montana State Legislature

Montana State Capitol
PO Box 200500
Helena, MT 59620-0500
Phone: (406) 444-4800

Media Registration for 2021 Floor Access

CREDENTIALING CRITERIA

1. Individuals must be employed by a commercial or non-profit news outlet providing print journalism (newspapers and magazines), broadcast journalism (radio or television), wire and news services for redistribution to other news organizations, or online news services (electronic dissemination rather than conventional print and broadcast distribution).
2. Credentials will be issued only to authorized representatives of the entities noted above and are not transferable.
3. Credentials will not be issued to individuals for the purpose of writing an online blog.
4. Credentials will not be issued to organizations or associations that register or serve as lobbyists.

INSTRUCTIONS

1. If the above credentialing criteria are met, please submit this form, a letter of introduction on official letterhead from the sponsoring news outlet, a scan or photocopy of a current state issued ID, and a photo to be used for your badge to legfinservices@mt.gov . Once these four items are received and approved, your paperwork will be forwarded to General Services Division (GSD) and your badge will be produced. When your badge is done, you will be contacted by GSD for payment and delivery options. Badges (and replacement badges) cost \$10 each.
2. **Accredited individuals agree to abide by the legislative standards of decorum.** Legislative standards of decorum can be found here: <https://leg.mt.gov/engage-government/media-guidelines/>
3. Your Media Access badge should be worn at all times when in the capitol building.

Please Print Legibly

Applicant Contact Information:

Applicant's Name: _____

Title/position: _____ Applicant's Cell Phone _____

Sponsoring Entity Contact Information:

Sponsoring News Organization: _____

Name of Immediate Supervisor: _____

Business Office Address: _____

Business Office Phone: _____ Supervisors Cell Phone: _____

Business or supervisor's Email Address _____

I acknowledge that access to the House and Senate chambers is a privilege accorded to the media by legislative leadership. I agree to abide by the rules and standards of behavior established by the presiding officers of the House and Senate, as outlined in the guide "Covering the Legislature." I understand that failure to abide by these rules and standards may result in the suspension or revocation of my access media ID card at the discretion of the presiding officer.

Applicant's Signature: _____ Date _____

Approval of Legislative Services Facilities & Continuity Coordinator _____ Date _____

Please check a box if you wish to have your cell phone number placed in the Capitol building emergency notification system for During Session ONLY During Session and the following interim (2 years)

Verification of Photo ID done