

Louisiana



House of Representatives

900 North 3rd Street

State Capitol Building

Baton Rouge, LA 70804

Legislative Media Application Form

Renewal Applicants: This Section Only

Full Name (*Please Print*): _____ Date: _____

Current Employer: _____ Job Title: _____

Supervisor Name: _____ Supervisor's Phone: _____

Supervisor Signature: _____ Continue use of picture on file? _____

New Applicants: Please Complete the below section in Full

Full Name (*Please Print*): _____ Date: _____

Address: _____

Phone: _____ Driver's License No./State _____

Employer: _____ Job Title: _____

Employer's Address: _____ Work Phone: _____

Supervisor: _____ Supervisor's Phone: _____

I certify the above information is correct and that I am dutifully employed as a member of the working news media.

Applicant's Signature _____ Date _____

Supervisor's Signature _____ Date _____

Please submit an electronic photo via e-mail (**Jpg format**) to our office at HouseSgt.atArms@legis.state.la.us. If you would prefer to have a picture taken in our office, please call and schedule an appointment with us at 225-342-1228.

There is an **annual** fee of **\$10.00** which covers the cost of the Yearly ID badge. You will be charged an additional **\$10.00** replacement fee for a lost badge. **We Do Not Accept Cash.**

Please make **checks/money orders** payable to: **Louisiana House of Representatives.**

Please remit this form with your payment to:

Office of Sergeant At Arms

P.O. Box 94062

Baton Rouge, LA 70804

Check here if you would like to receive your media information via e-mail only.

E-Mail Address: _____

For Office Use Only

Date Paid _____ Payment Method _____ Pick up Date _____

Signature/Initial of Staff _____

For Office Use Only

Date Paid_____ Payment Method_____ Pick up Date_____

Signature/Initial of Staff_____