

2013 CONTINGENCY CLAIM FORM

| Section 1: | You must complete this form and return it to the sanctioning club BEFORE THE RACE TAKES PLACE. No retroactive claim forms will be considered. Complete in Full - MUST PRINT. Any form that is not legible or not fully completed with all rider info will not be processed. | | | | | | | | | | |
|-----------------|---|--------------------|---------------------|--------|---|-----------------|---------------|---------------------------|-----------------|---|---|
| Name: | | | | | | | | | Date: | | |
| Street: | | | | | | | | Check box if new address: | | | |
| City & State: | | Zip Code: | | | | | | | aaaress: [| | |
| Phone: | () <u>Classes Entered</u> : | | | | | | | | | | |
| SOCIAL SECURIT | Y#: | | | | | | | | | | |
| - | | <u>-</u> | | 3 4 | | | | | | | |
| Section 2: | TECH INSPECTION | | Dunlop Front/Rea | | F | ork cals (2) | 11" I Deca | Fairing als (2) | Dunlop Patch | | |
| Class | | | _ |] | [|] | [|] | [|] | |
| | | | | | [|] | [|] | [|] | |
| | 3 | | [|] | [|] | [|] | [|] | |
| | 4 | | [|] | [|] | [|] | [|] | |
| Certified By: | | | | : | | | | | | | |
| Section 3: | SANCTIONING CLUB - Complete In Full Before Sending to Dunlop | | | | | | | | | | • |
| Race Date: | // | Class | Class 1 | | | | | <u>Finish</u> | | | |
| Location: | Brainerd Inte | ernational Raceway | | 2 | | | | | | | |
| Club Signature: | | | | 3 | | | | | | | |
| Date: | | | | 4 | | | | | | | |
| | | | | 5 | | | | | | | |
| | | | | 6 | | | | | | | |

CLUB Mail all forms to: Cori Maynard – MCY Dept 🗗 Dunlop Tire Corp. 🗗 P.O. Box 1109 🗗 Buffalo, NY 14240

MUST Include Official Results (Required to Process Claim Forms)

Note: Rider/Tech/Club - No certificates will be issued unless all information is provided.