2013 CRA Contingency

Claim Form - TEAM CHALLENGE

Date:

Location: Brainerd International Raceway

Instructions: Complete form and return to tech inspection prior to first race of day. No retroactive claim forms will be accepted. Failure to complete form in a legible manner will result in the form not being processed. To be eligible for awards, riders must submit this form, and all other forms as required by each company, and meet all requirements set forth by the respective companies. Please note, the CRA offers these rewards on behalf of participating companies but does not warrant or guarantee payment of any rewards. The CRA shall assist by notifying companies of riders that have qualified for awards.

COMPETITOR INFORMATION

TEAM CHALLENGE

Note: Enter only name of one team member. Listed rider will be responsible for dividing up all prizes.

NAME	NAME TEAM COMPETITION #										
VIN#(IF APPLYING	FOR MANF.	CONTINGENCY)									
STREET ADDR	ESS										
CITY				STATE			ZI	P			
				PHONE			EN	ИAIL			
Bike #1				Bike #2				Bike #3			
Year:				Year:				Year:			
Make:				Make.				Make:			
Model:				Model:				Model:			
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Company	Decal	Product	Tech Insp. Initial	Company	Decal	Product	Tech Ins. Initial	Company	Decal	Product	Tech Ins. Initial
Bridgestone				Bridgestone		<u> </u>	2111111111	Bridgestone			
Continental				Continental				Continental			
Dunlop				Dunlop				Dunlop			
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irrevocably r public relation	elease thons. I und onsibility	ne CRA and derstand th v. I undersi	d all affilia nat this co gned/ as a	ates to use my na ntingency may b	ame, pho e report	tograph, li able to the	keness and Internal l	companies listed d racing results Revenue Service atements made	for adve	rtising and and all tax	xes are
Competitor Name:				Co	Competitor Signature:						
Tech Inspe	ection										
-		ie CRA a	t the afo	rementioned	event.	I certify 1	that this	racer has con	aplied v	with the	
program re					J , 21109	_ 001 011 /	-1000 UIII	- Heer ride con	-Pca		
Officials Name:			Off	Officials Signature:				Date:			