



2017 BLACK ARMOR HELMETS U.S. MAJORS TOUR CONTINGENCY PROGRAM

CLAIM FORM

REGISTRATION: Competitors must be officially registered to participate in the program before the date of the event in which you will be competing. No awards will be paid if you are not enrolled prior to competing. Additionally, competitors must complete and submit this Claim Form no later than 30 days after each eligible event.

DECALS AND PATCHES: All competitors must display three Black Armor decals – one on the front and one each side of the vehicle. Decals are distributed by SCCA and may be requested from: contingency@scca.com.

VERIFICATION and AWARD PAYMENT: *Decal placements must be verified on-site by a tech official - who must sign this claim form.* Claim forms may be signed prior to the posting of Official Results. Completed claim forms must be submitted with a copy of the Official Race Results and will be verified upon receipt. Finishing positions will be verified by the SCCA National Staff; awards will be made to legal finishers only.

NAME: _____

EVENT LOCATION: _____

ADDRESS: _____

EVENT DATE: _____

CITY: _____

FINISH POSITION: _____

STATE: _____ ZIP: _____

CLASS: _____ CAR # _____

DAY PHONE: _____

CURRENT BLACK ARMOR HELMET OWNER? _____

E-MAIL: _____

SCCA MEMBER #: _____

Award Information:	<ul style="list-style-type: none">• Payouts are presented to the 1st – 3rd place drivers per race in SCCA U.S. Majors Tour competition.• Competitor must finish ahead of two other competitors in class to claim award.• Only two discount codes can be used per purchase. Product certificates must be redeemed by 12/31/17.• This contingency program is verified by SCCA and paid by Black Armor Helmets. For payout details or to ask questions, please call (800) 770-2055.			
PAYOUT SCHEDULE		1 st	2 nd	3 rd
All Classes		\$100 certificate	\$75 certificate	\$50 certificate

By signing below, I understand and agree to the conditions of the Black Armor contingency program and acknowledge that I have never been compensated for the above claim.

DRIVER/CAR OWNER SIGNATURE

DATE

The named competitor has met all program requirements as verified on-site by:

TECH OFFICIAL SIGNATURE

SCCA MEMBER NUMBER

DATE

SUBMIT TO: SPORTS CAR CLUB OF AMERICA
Attn: Club Racing Contingency Claims
6620 SE Dwight St
Topeka, KS 66619
FAX: (855) 263-5524
contingency@scca.com

Please copy this form as needed for submission of additional claims. Signatures may not be copied.