

2018 HONDA PERFORMANCE DEVELOPMENT RALLYCROSS NATIONAL SERIES CONTINGENCY PROGRAM

CLAIM FORM

REGISTRATION: Competitors must be officially registered to participate in the program prior to competing. No awards will be paid if you are not enrolled prior to competing in an eligible event. A current W-9 form must be on file with SCCA prior to the distribution of awards Additionally, competitors must complete and submit this Claim Form no later than 30 days after each eligible event.

DECALS: All competitors must display three Honda or Acura decals - Decals are required on the center of the front bumper and on the rear quarter of each side of the vehicle per the HPD placement diagrams. All sedans must use a 15" minimum HONDA/ACURA decal on the front and 24" Honda Racing or Acura Motorsports decals on the rear quarters. Decals are available by request from SCCA by emailing contingency@scca.com.

VERIFICATION and **AWARD PAYMENT**: Product use and decal placements must be verified on-site by a tech official - who must sign this claim form. Claim forms may be signed to verify decals placements/product use prior to the posting of Official Results. Completed claim forms must be submitted with 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. Payment is issued by SCCA within 30 days of claim receipt.

NAME:				
ADDRESS:		•••		
CITY:	EVENT LOCATION			
STATE: ZIP:	EVENT DATE:			
DAY PHONE:	FINISH POSITION	:		
E-MAIL:	CLASS:	CAR # _		
SCCA MEMBER #:	CAR MODEL:		CAR YEAR:	
3 competitors : the class are re This contingence	4 competitors in class are required to be eligible for fue 1st and 2nd awards only, 2 competitors = 1st place are equired to be eligible for any National Championship acts program is administered and paid entirely by SCC contact Brandy Wiggans at contingency@scca.com	ward only. A minimum awards.	n of 5 competitors in	
Per Event/Class	\$150	\$100	\$50	
National Championship	\$500	\$300	\$100	
hat I have never been compensated for			ogram and acknowledge	
DRIVER/CAR OWNER SIGNATURE	DATE	<u>:</u>		
Γhe required product use and/or decal p	lacement of this competitor has been verified on-site	by:		
TECH OFFICIAL SIGNATURE	SCCA MEMBER NUMBER	DATE		
SUBMIT TO: Email: contingency@sc Fax: (855) 263-5524		form as needed	for submission of	

additional claims. Signatures may not be copied.

Attn: Contingency Claims

6620 SE Dwight St Topeka, KS 66619