

## 2021 PIRELLI TIRE SCCA U.S. MAJORS TOUR CONTINGENCY PROGRAM CLAIM FORM

REGISTRATION: Competitors must officially register to participate each year in this program with SCCA prior to competing. No awards will be paid if you are not enrolled prior to competing in the event. Additionally, competitors must complete and submit this official verified Claim Form no later than 30 days after each eligible event.

**DECALS AND PATCHES:** All competitors must display four 11" Pirelli Tire decals – one on each fender or wing end plates. No competing decals or patches may be displayed. Decals are available upon request from SCCA by emailing <a href="mailto:contingency@scca.com">contingency@scca.com</a>.

**VERIFICATION** and **AWARD PAYMENT:** Decal placements and product use 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. Separate completed claim forms for **each race day** must be submitted with a copy of the original paid invoice from an authorized Pirelli race tire dealer and will be verified upon receipt. Finishing positions will be verified by the SCCA National Staff; awards will be made to legal finishers only. Awards will be mailed by Pirelli Tire to the address provided approximately 60 days after claim receipt.

NAME:

EVENT LOCATION: \_\_\_\_\_

ADDRESS:		EVENT DATE:	
CITY:		FINISH POSITION:	
STATE:	ZIP:	CLASS:	CAR #
PHONE:		TIRE MODEL:	
E-MAIL:		TIRE SIZE:	
SCCA MEMBER #	t:		
Award Information:	<ul> <li>A minimum of three starters in claplace awards.</li> </ul>	the 1 <sup>st</sup> and 2 <sup>nd</sup> place drivers per race in SC ass are required to claim 1 <sup>st</sup> place awards, fified by SCCA and paid by Pirelli Tire. For pangency@scca.com	ive cars are required to claim 2 <sup>nd</sup>
PAYOUT SCHED		1 <sup>st</sup>	2 <sup>nd</sup>
FA, GTX, GT1, G		2 free tires	1 free tire
	I understand and agree to the condition of the above claim.	ns of the Pirelli Tire Contingency program a	and acknowledge that I have never
DRIVER/CAR O	WNER SIGNATURE		DATE
The named compe	titor has met all program requirements	as verified on-site by:	
TECH OFFICIA	L SIGNATURE	SCCA MEMBER NUMBER	DATE
SUBMIT TO:	Email: <a href="mailto:contingency@scca.com">contingency@scca.com</a> Fax: (855) 263-5524		orm as needed for submission of Signatures may not be copied.