

2021 UTV CONTINGENCY FORM

Driver of Record _____ Event _____ Date _____
 Address _____ City _____ State/Zip _____
 Home Phone _____ Cell Phone _____ Work/Day _____
 Class _____ Make of Veh _____ Vehicle # _____
 Email _____

TO RECEIVE CONTINGENCY AWARDS, THIS FORM MUST BE **COMPLETE & LEGIBLE**. NO P.O. BOXES ALLOWED. **NO EXCEPTIONS**.

COMPANY	COMPANY	DECALS NEEDED
<input type="checkbox"/> ADVANCED AIR CLEANER	<input type="checkbox"/> SLIME	_____
<input type="checkbox"/> AIM SPORTS	<input type="checkbox"/> SPEED STRAP	_____
<input type="checkbox"/> ALL TERRAIN CONCEPTS	<input type="checkbox"/> SUNOCO RACE FUELS	_____
<input type="checkbox"/> AUTOMETER	<input type="checkbox"/> UPR RACING SUPPLY	_____
<input type="checkbox"/> BAJA DESIGNS	<input type="checkbox"/> VISION X LIGHTING	_____
<input type="checkbox"/> BF GOODRICH TIRES	<input type="checkbox"/> VP RACING FUELS	_____
<input type="checkbox"/> BILSTEIN SHOCKS	<input type="checkbox"/> WEDDLE	_____
<input type="checkbox"/> CST TIRES	<input type="checkbox"/> YOKOHAMA TIRES	_____
<input type="checkbox"/> F&L FUEL		_____
<input type="checkbox"/> FLUID FLOW PERFORMANCE FITTINGS		_____
<input type="checkbox"/> FORTIN RACING		_____
<input type="checkbox"/> FOX		_____
<input type="checkbox"/> G1 PRODUCTS- FUEL & PIT MATS		_____
<input type="checkbox"/> HARMON RACING CELLS		_____
<input type="checkbox"/> KC HILITES		_____
<input type="checkbox"/> KEVIN MCMULLEN FABRICATION & TRANSAXLES		_____
<input type="checkbox"/> KING SHOCKS		_____
<input type="checkbox"/> LIGHTFORCE PERFORMANCE LIGHTING		_____
<input type="checkbox"/> MAXXIS		_____
<input type="checkbox"/> OPTIMA BATTERIES		_____
<input type="checkbox"/> PCI RACE RADIOS		_____
<input type="checkbox"/> PRP SEATS		_____
<input type="checkbox"/> RACELINE WHEELS		_____
<input type="checkbox"/> RUGGED RADIOS		_____
<input type="checkbox"/> SDHQ		_____
<input type="checkbox"/> SHOCK THERAPY		_____
<input type="checkbox"/> SIGNPROS		_____

A FORM MUST BE COMPLETED FOR EACH EVENT, FORM MUST BE TURNED IN TO THE CONTINGENCY INSPECTOR BEFORE THE RACE BEGINS.



IMPORTANT - PLEASE READ

FOR MANUFACTURES REQUIREMENTS PLEASE REFER TO THE CONTINGENCY LIST. YOU MUST COMPLETE AND SIGN THIS FORM TO BE ELIGIBLE FOR THESE AWARDS. PLEASE MARK THE BOX IN THE LEFT COLUMN, UNDER DRIVER CHECK, BESIDE THE MANUFACTURERS PRODUCTS YOU ARE DECLARING AND HAND THIS FORM TO THE CONTINGENCY OFFICIAL. BY SIGNING THIS FORM YOU ARE GIVING THE COMPANY(S) PERMISSION TO USE YOUR NAME AND PHOTO IN THEIR PROMOTIONS FOR ONE YEAR. PROVIDING THEY HAVE PAID YOU OR GIVEN YOU PRODUCT. ALTHOUGH BEST IN THE DESERT DOES ALL THAT IS POSSIBLE TO ASSIST YOU IN COLLECTING YOUR CONTINGENCY AWARDS, WE DO NOT GUARANTEE PAYMENT OF THESE MONIES OR PRODUCT.

I UNDERSTAND THAT OFF ROAD RACING IS A DANGEROUS ACTIVITY. I UNDERSTAND THAT BY PARTICIPATING IN THIS EVENT I AM EXPOSING MYSELF TO THE POSSIBILITY OF SERIOUS INJURY TO MY PERSON, TO MY FAMILY, AND FRIENDS THAT I BRING WITH ME AND TO MY PROPERTY. I VOLUNTARITY ACCEPT THOSE RISKS AND ACCEPT ALL RESPONSIBILITY.

I HEREBY RELEASE, WAIVE, DISCHARGE, AND PROMISE NOT TO SUE EVENT PROMOTER, EVENT SPONSORS, CONTINGENCY DONORS, OTHER DRIVERS, OWNERS AND SPONSORS.

 SIGNATURE DATE OFFICIAL