

Contingency Status Report



Please fill this form out completely to have your contingency checked on a per event basis. CCS and ASRA will not simply research a full season, this form must be filled out for each individual event and class.

ASRA makes no guarantee of payment from any sponsor.

| | Rider Name: | | | _ | | |
|-------|--------------------|-------|-------|---|---------------------|-------------------------------|
| | Day Phone # () | | | | | |
| | Email | | | | | |
| | Today's Date: | | | _ | | |
| | Date of the event: | | | | | |
| | Track: | | | | | |
| Class | | Place | Award | | Contingency Form | Sponsor listed on Results Y/N |
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Fax, Mail or E-mail completed form to:

ASRA/CCS

9928 Peregrine Trail

Ft Worth, TX 76108-4194

Fax: 817-246-2977 - Email: Contingency@ccsracing.us