



Contingency Award Request Checklist

Before mailing your contingency request, please be sure you have checked each item below to ensure your request can be processed. Contingency requests submitted without the required forms and information cannot be paid.

- Contingency Request Form** - This form must be completed in full. Please print or type legibly.
- W-9 Form** - Your first contingency request **must** include a W-9 Tax Form, even if you have previously submitted a W-9 form. Please use only the current (December 2011) form.
- Official Race Results** - You must submit a copy of the official (final) race results along with the contingency request form. Results must include:
 - ✓ Driver's name (must match name on request form)
 - ✓ Make or Model of Vehicle (formula and sports racing cars must show Mazda in results)
 - ✓ Racing class and finishing position
 - ✓ Race event name and date held; sanctioning body or racing club
(MyLaps results **will NOT be accepted unless** they show all information noted above).
- Photo** - Your first contingency request each year must include color photos of your vehicle showing the 26" MAZDASPEED logo (front) and 22" Mazda logo (rear quarter panel) decals on the vehicle. Decals must be the correct size, color (white, black, silver, blue) and on a solid background for contingency award funds to be paid. In addition, your photo must display the race car number that corresponds to the car number listed on the race results submitted. See Decal Order Form for decal part numbers and decal kits.

PLEASE FILL OUT ALL SECTIONS COMPLETELY

Date _____ Team Support _____ Daytime Phone _____

Driver's Name _____ Evening Phone _____

X X X - X X - _____

Social Security Number (enter last 4 digits only)

OR

X X - X X X _____

Tax ID Number (enter last 4 digits only)

Mailing Address _____

City _____ State _____ Zip _____

Check here if address has changed.

E-mail Address _____

Race Event _____ Event Date _____

Event Location (Track) _____

Class _____ Model _____ Year _____

Finishing Position _____ Award Amount _____

The first request of the year **MUST** include a completed W-9 form **AND** a current color photo of your race vehicle showing the proper placement of the required Mazda decals.

Please mail form to: MAZDASPEED MOTORSPORTS
Attn: Contingency Requests
1421 Reynolds Avenue
Irvine, CA 92614
800-435-2508