

### SPRINT CARS of NEW ENGLAND (SCONE) 2025 MEMBERSHIP APPLICATION & REGISTRATION



PLEASE COMPLETE ALL INFORMATION - PLEASE PRINT CLEARLY

Name		_Date of Birth		
Address		Social Security #		
	IP	Cell Phone		
Email		Other Phone		
Emergency Contact		_Cell Phone		
CAR NUMBER REQUEST  Management will make every effort to accommodate car number requests, but are allowed but may be subject to approval before competition.	t changes may need	l to be made depending or	·	and 3-digit numbers
Car No. Requested 2 <sup>nd</sup> Choice				
LICENSE TYPE:	(check one)	<u>FEE UNTIL</u> FEB. 28	<u>FEE AS OF</u> MARCH 1	SINGLE DAY LICENSE
Owner/Driver Combo		\$100	\$125	<u>\$25</u>
Driver Only		<u></u> \$75	\$100	\$25
Car Owner Only (Non-Driver) Team/Car No.:		\$75	\$100	n/a
Member (Non-Driver) Team/Car No.:		\$30	\$50	n/a
Credit Card # (Note: 4% Processing Fee)				
Exp. Date Security Code C	ard Holder Sign	ature		
Billing Address				
City		rov. ZII	P/Postal Code	
RELEASE & W  I certify that I am the person identified on this membership application and her and for an accompanying license to participate in motorsports events sanctioned by the sa Upon acceptance of this application by SCoNE or any affiliate company owne without further compensation to the undersigned, their name(s), picture(s), likeness(es), i part thereof, for all purposes and in any manner in connection with promoting, advertisin way from SCoNE-sanctioned events, whether before, during, or after such event(s), includ digital media. The undersigned understands and agrees that this exclusive right shall be for transmit, film, tape, capture, overhear, photograph, and collect or record by any means all owner of any and all related intellectual property rights.  I am familiar with the rules of SCoNE and agree to abide by the rules as they SCoNE website <a href="www.nesprintcars.com">www.nesprintcars.com</a> . I agree to be bound by all decisions made by SCoN I understand that acceptance of this application and accompanying fee by ar certify that I am either an independent contractor or an employee of another person or ent contractor if my application is approved. Should my membership be approved and later to paid in connection with this application, and further, I waive all rights or claims to any born for myself, my agents, and assigns, to institute any action, suit, or proceeding against SCo employees, agents, or servants, or any persons for whose activities SCoNE may be responsil or decision making of any event. I agree that if, for any reason, I disregard the terms out of the part of the part of the part of the part of the terms of the part	me. d by any principal, the mage(s) and/or videol g, recording, reporting ing but not limited to eely assignable by SCc images, sounds, data, may be amended. I ur E officers, directors, ag ny official or represent ity, and not an agent, erminated, whether vo us money due me resu. NE for any act or actic ble, arising out of the p ed herein, I agree to p he undersigned, for th d obligations. iors, and employees frei in the future may have tract, and any other lo  A RELEASE OF CI	ship with SPRINT CARS OF NEW undersigned hereby agrees the sylonge of vehicle(s) and/or other end of the sylonge of the sylong	and SCONE shall have the quipment, voice(s), and reproducing, or exploit adio broadcasts, film protent and in perpetuity ownstring any SCONE event and the version(s) of SCONE runall be final and without ssarily constitute approto, and I will retain such stall be without restitution the SCONE prior to termine fusal to act on the parting, operating, regulating and/or other costs assocs, and assigns, I do hese(s) of actions, suit(s), of SCONE events. I understall herein.	e exclusive right to use, performance(s), or any ing or benefiting in any iductions, print, and/or all rights to broadcast, d that SCoNE is the sole itles are available at the recourse or appeal. val of the application. I atus of an independent in of any part of my fee nation. I waive all rights to f SCoNE or any of its g, scoring, rulemaking, iated with legal actions hereby authorize SCoNE damage(s), and claim(s) and and agree that this
Applicant's Signature			Date	
RETURN FORMS TO: Sprint Cars of New England	OFFICIAL USE ONI	<u>.Y:</u>		
3274 VT Route 22A Bridport VT 05734	Rec'd by:		Date:	

Amt. Paid: \$

Check

Credit

Money Order

Email: sconesprintcars@gmail.com

### Form W-9 (Rev. October 2018)

(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

#### Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 1	Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.				
	2	Business name/disregarded entity name, if different from above				
n page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.    Individual/sole proprietor or				4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
ons		Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership single-member LLC	L Iru	svestate	Exempt payee code (if any)	
or typ		Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partner  Note: Check the appropriate box in the line above for the tax classification of the single-member or		not check	Exemption from FATCA reporting	
Print or type. Specific Instructions on		LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the canother LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single is disregarded from the owner should check the appropriate box for the tax classification of its own	wner of to gle-memb	he LLC is	code (if any)	
ec <u>it</u>	Ιг	Other (see instructions) ▶			(Applies to accounts maintained outside the U.S.)	
<b>ge</b> Spe	5 /	Address (number, street, and apt. or suite no.) See instructions.	Request	er's name a	nd address (optional)	
•	6 (	City, state, and ZIP code				
	7 L	ist account number(s) here (optional)				
Par	tΙ	Taxpayer Identification Number (TIN)				
		TIN in the appropriate box. The TIN provided must match the name given on line 1 to av		Social sec	urity number	
reside entitie	nt a s, it	thholding. For individuals, this is generally your social security number (SSN). However, f lien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	ta			
	T/I/I, later.  Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and  Employer identification number				identification number	
		o Give the Requester for guidelines on whose number to enter.	and		-	
Par	t II	Certification				
		nalties of perjury, I certify that:				
The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and     I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and						
3. I an	nal	J.S. citizen or other U.S. person (defined below); and				
4. The	FA	TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	g is com	ect.		
you ha acquis other t	ave fa sition than	on instructions. You must cross out item 2 above if you have been notified by the IRS that you alled to report all interest and dividends on your tax return. For real estate transactions, item 2 or abandonment of secured property, cancellation of debt, contributions to an individual retire interest and dividends, you are not required to sign the certification, but you must provide you	does no ement ar	t apply. Fo	r mortgage interest paid, (IRA), and generally, payments	
Sign Here		Signature of U.S. person ►	Date ►			

#### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to <a href="https://www.irs.gov/FormW9">www.irs.gov/FormW9</a>.

#### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

. Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- · Form 1099-S (proceeds from real estate transactions)
- . Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
   Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



# SPRINT CARS of NEW ENGLAND (SCONE) 2025 MEDIA INFORMATION



PLEASE COMPLETE ALL INFORMATION – USED FOR MEDIA, ROSTERS, ETC. – PLEASE PRINT CLEARLY

DRIVER INFO						
Name:						
Hometown:		9	State/Province:			
Birth Date:	Age:	Occupation:				
Spouse/Children:						
Years Racing:	Racing Exper	ience & Highlights:				
CONTACT INFO						
		Other Phone:				
	Il Phone: Other Phone: Website:					
		our race team? (check all that ap				
☐ Facebook		☐ Instagram	☐ Snapchat			
		_	•			
<u> </u>						
CAR INFO						
Year:	Chassis:					
Engine Type/Displacement:		I	Primary Fuel Used:			
Engine Builder/Location:				_		
TEANA INICO (Planca list finat	AND last names					
TEAM INFO (Please list first <u>.</u>		Crow Chia	.f.			
		Crew Chie				
ream Members:						
SPONSOR INFO (Driver roste	ers will list as many sp	oonsors as space allows)				
Primary sponsor (list ONE):_						
Other sponsors:						



# SPRINT CARS of NEW ENGLAND (SCONE) 2025 ROOKIE APPLICATION



PLEASE COMPLETE ALL INFORMATION - PLEASE PRINT CLEARLY

Driver:	Phone:
Email:	
for approv	Rookie approval requests are evaluated on an individual basis and in rare cases exceptions may be granted val. No driver shall assume he/she is eligible for Rookie status or benefits without receiving official approval IE management.
ROOKII	E ELIGIBILITY REQUIREMENTS
Drivers re	questing Rookie status in 2025 must meet ALL of the following criteria:
•	No more than five (5) feature race starts in Winged 360 Sprint Cars in any single season
•	No more than ten (10) total attempts to qualify in Winged 360 Sprint Cars during career
•	No feature race wins in Winged 360 Sprint Cars during career
•	No more than three (3) total feature race starts in any higher division during career
List all pre	vious racing experience:
Signature	Date