

Super Grip Corporation - USA 2006 GRAND NATIONAL CROSS COUNTRY SERIES ATV CONTINGENCY AND RELEASE FORM

1. THE EVENT			der discount		
RACE DATE: / /	RACE LOCATION:	a.	LASS:	MARIE .	
OVERALL FINISH:	TIRE SIZE & MODEL:			A MINIMUM OF FOUR (4) SUPER GRIP DECALS MUST BE DISPLAYED ON THE ATV	
	FRONT:	REAR:			
	ning this form you are verify 2) 5" decals on the top fende	ring that the rider ran four (4) Super Grip tires are.	and a minimum of two (2) 8" decals ANI		
OFFICIAL VERIFICATION:			mm dd	уууу	
X			date:	The state of the s	
† † 111 00	MOI ETED EODMS	RECEIVED LATER THAN 30 DAYS O	OF PACE DATE WILL BE DENU	0 tt A 4 4	

2. THE RIDER

RIDER PHONE NUMBER:

RIDER EMAIL ADDRESS:

THE W-9 FORM ON THE REVERSE SIDE OF THIS <u>MUST</u> BE FILLED OUT IN ORDER FOR THIS CONTINGENCY SUBMISSION TO BE CONSIDERED. A PRINTOUT OF RACE RESULTS MUST ACCOMPANY THIS FORM.

3. RELEASE OF RIDER

In applying to quality and compete for contingency prizes during the 2006 racing season, I hereby acknowledge that I am at least 18 years of age and that: I am fully aware of the hazards and dangers involved in racing and hereby assume all risks involved in my participation of such events. I acknowledge that Super Grip Corporation - USA and it's employees and agents have no control over the planning, organizing and/or managing of such events. I agree to hold harmless and indemnify Super Grip Corporation - USA, its employees and agents from all personal injuries and/or damages caused by my participation in such events. I hereby grant Super Grip Corporation - USA and any person authorized by the company to use my name, accomplishments, photographic images, and statements in any manner and without time limitation for the purposes of promoting Super Grip Corporation - USA and its products.

I have read and understood the foregoing release.

PRINTED NAME:

SIGNATURE:

DATE:

CLASSES	1st	2nd	3rd	4th	5th
PRO	\$275.00	\$200.00	\$150.00	\$125.00	\$100.00
PRO AM	\$225.00	\$175.00	\$125.00	\$100.00	\$75.00
OPEN A					
2-STROKE A	\$175.00	\$125.00	\$100.00	\$75.00	\$50.00
4-STROKE A					
OPEN B	100 PM	31,280		12630	E STATE OF THE STA
2-STROKE B	1	CONTRACTOR OF THE PARTY OF THE			0.00
4-STORKEB			A STATE	in our	537 (1975)
SPORT	SET OF	DAID OF	3600		
JUNIOR	SELOF	PAIR OF	the war will	me to	TO THE STATE OF
VET	4	2 2	¢75.00	\$5000	¢50
SENIOR	SUPER GRIP	SUPER GRIP	\$75.00	\$50.00	\$50.00
UTILITY STOCK	STINGER	STINGER		(i V	
UTILITY MODIFIED	TIRES	TIRES	8 11 7	1 1 1 1 1 1 1 1	N. William
JTILITY UNLIMITED	THUES	TIMES		Line Fred	
WOMEN		2000 3 3 KM			5
4-STROKE STOCK	of officer	(B) Company	· 000000000000000000000000000000000000		
OPEN C	PAIR OF				
125 C	7	1	1 1		
250 C	2	SUPER GRIP	SUPER GRIP		
250 FC	SUPER GRIP				
SENIOR	STINGER	STINGER	STINGER		
VET C	TIRES	TIRE	TIRE		

Please allow 4-8 week for contingency processing. Tires cannot be shipped to P.O. Box addresses. If the address provided on the back of this form is a P.O. Box, please provide an alternative shipping address.

Complete forms must be submitted at the LTE Racing Teams's Super Grip contingency dropbox within 15 days of the race.

Questions can be sent to: racing.supergrip@gmail.com

Department of the Treasury

Request for Taxpayer Identification Number and Certification

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

internal r	vertue Service						
ge 2.	Name (as shown on your income tax return)						
s on page	Business name, if different from above						
Print or type Specific Instructions	Check appropriate box: Sole proprietor Corporation Partnership Otl	her >	Exempt from backup withholding				
Print o	Address (number, street, and apt. or suite no.)	Requester's name and a	address (optional)				
pecific	City, state, and ZIP code						
See S	List account number(s) here (optional)						
Part	Taxpayer Identification Number (TIN)						
Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.							
Note. to ente	the account is in more than one name, see the chart on page 4 for guidelines on wh	nose number Employer in	dentification number				
Part	Certification						
Under	enalties of perjury, I certify that:						
1. The	number shown on this form is my correct taxpayer identification number (or I am wa	aiting for a number to be is	sued to me), and				
Re	not subject to backup withholding because: (a) I am exempt from backup withholding enue Service (IRS) that I am subject to backup withholding as a result of a failure to ied me that I am no longer subject to backup withholding, and						
3. I a	a U.S. person (including a U.S. resident alien).						
withho For mo arrange	tion instructions. You must cross out item 2 above if you have been notified by the ing because you have failed to report all interest and dividends on your tax return. Figage interest paid, acquisition or abandonment of secured property, cancellation of nent (IRA), and generally, payments other than interest and dividends, you are not reyour correct TIN. (See the instructions on page 4.)	For real estate transactions debt, contributions to an i	, item 2 does not apply. Individual retirement				
Sign Here	Signature of U.S. person ▶	Date ▶					

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding,
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes you are considered a person if you

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

• Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
 - 2. The treaty article addressing the income.
- 3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.