



# SPRINT CARS of NEW ENGLAND (SCoNE)

## 2024 MEMBERSHIP APPLICATION & REGISTRATION



*PLEASE COMPLETE ALL INFORMATION – PLEASE PRINT CLEARLY*

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Social Security # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Other Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Cell Phone \_\_\_\_\_

**CAR NUMBER REQUEST**

Management will make every effort to accommodate car number requests, but changes may need to be made depending on availability. Letters and 3-digit numbers are allowed but may be subject to approval before competition.

Car No. Requested \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_ Previous No. \_\_\_\_\_

<b>LICENSE TYPE:</b>	<i>(check one)</i>	<b>FEE UNTIL</b>	<b>FEE AS OF</b>	<b>SINGLE DAY</b>
		<b>JAN. 31</b>	<b>FEB. 1</b>	<b>LICENSE</b>
Owner/Driver Combo	<input type="checkbox"/>	\$100	\$125	\$25
Driver Only	<input type="checkbox"/>	\$75	\$100	\$25
Car Owner Only (Non-Driver) <i>Team/Car No.:</i> _____	<input type="checkbox"/>	\$75	\$100	n/a
Member (Non-Driver) <i>Team/Car No.:</i> _____	<input type="checkbox"/>	\$30	\$50	n/a

Credit Card # (Note: 4% Processing Fee) \_\_\_\_\_

Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_ Card Holder Signature \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State/Prov. \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_

**RELEASE & WAIVER OF LIABILITY**

I certify that I am the person identified on this membership application and hereby apply for membership with SPRINT CARS OF NEW ENGLAND (hereinafter referred to as "SCoNE") and for an accompanying license to participate in motorsports events sanctioned by the same.

Upon acceptance of this application by SCoNE or any affiliate company owned by any principal, the undersigned hereby agrees that SCoNE shall have the exclusive right to use, without further compensation to the undersigned, their name(s), picture(s), likeness(es), image(s) and/or video(s) of vehicle(s) and/or other equipment, voice(s), and performance(s), or any part thereof, for all purposes and in any manner in connection with promoting, advertising, recording, reporting, broadcasting, producing and reproducing, or exploiting or benefiting in any way from SCoNE-sanctioned events, whether before, during, or after such event(s), including but not limited to photography, television and radio broadcasts, film productions, print, and/or digital media. The undersigned understands and agrees that this exclusive right shall be freely assignable by SCoNE and that SCoNE exclusively and in perpetuity owns all rights to broadcast, transmit, film, tape, capture, overhear, photograph, and collect or record by any means all images, sounds, data, and the like arising from or during any SCoNE event and that SCoNE is the sole 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 may be amended. I understand that the most current version(s) of SCoNE rules are available at the SCoNE website [www.nesprintcars.com](http://www.nesprintcars.com). I agree to be bound by all decisions made by SCoNE officers, directors, agents, and employees, which shall be final and without recourse or appeal.

I understand that acceptance of this application and accompanying fee by any official or representative of SCoNE does not necessarily constitute approval of the application. I certify that I am either an independent contractor or an employee of another person or entity, and not an agent, servant, or employee of SCoNE, and I will retain such status of an independent contractor if my application is approved. Should my membership be approved and later terminated, whether voluntarily or involuntarily, it shall be without restitution of any part of my fee paid in connection with this application, and further, I waive all rights or claims to any bonus money due me resulting from my racing efforts with SCoNE prior to termination. I waive all rights for myself, my agents, and assigns, to institute any action, suit, or proceeding against SCoNE for any act or action taken or not taken, or any refusal to act on the part of SCoNE or any of its employees, agents, or servants, or any persons for whose activities SCoNE may be responsible, arising out of the promoting, sanctioning, sponsoring, operating, regulating, scoring, rulemaking, or decision making of any event. I agree that if, for any reason, I disregard the terms outlined herein, I agree to pay all SCoNE costs for counsel and/or other costs associated with legal actions I may pursue. In consideration of acceptance of my application for membership by SCoNE, the undersigned, for themselves and their heirs, successors, and assigns, I do hereby authorize SCoNE to withhold any monies owed to me or my authorized agent(s) or affiliate(s) for any unpaid obligations.

I hereby release, indemnify, and waive liability of SCoNE and its officers, directors, and employees from all manner of action(s), cause(s) of actions, suit(s), damage(s), and claim(s) that the undersigned or their heirs, successors, and assigns may have now or at any time in the future may have, arising in any manner from SCoNE events. I understand and agree that this application constitutes a waiver and release of all claims for personal injury, breach of contract, and any other loss or damage except as defined herein.

**I HAVE READ THIS DOCUMENT. I UNDERSTAND THAT IT IS A RELEASE OF CERTAIN CLAIMS. I UNDERSTAND THAT I ASSUME ALL RISKS INHERENT TO AUTOMOBILE RACING. I VOLUNTARILY SIGN MY NAME INDICATING MY ACCEPTANCE OF THE ABOVE PROVISIONS.**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

RETURN FORMS TO: Sprint Cars of New England  
 3274 VT Route 22A  
 Bridport, VT 05734  
 Email: [sconesprintcars@gmail.com](mailto:sconesprintcars@gmail.com)

<b>OFFICIAL USE ONLY:</b>				
Rec'd by: _____	Date: _____			
Amt. Paid: \$ _____	Cash	Check	Credit	Money Order

## Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

<b>Print or type.</b> See Specific Instructions on page 3.	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	<b>2</b> Business name/disregarded entity name, if different from above	
	<b>3</b> 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.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.  <input type="checkbox"/> Other (see instructions) ▶ _____	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <i>(Applies to accounts maintained outside the U.S.)</i>
	<b>5</b> Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	<b>6</b> City, state, and ZIP code	
	<b>7</b> List account number(s) here (optional)	

### Part I 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 generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-			-				
or											
Employer identification number											
				-							

### Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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 am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	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 [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## 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) 2024 MEDIA INFORMATION



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

**DRIVER INFO**

Name: \_\_\_\_\_ Division: \_\_\_\_\_

Hometown: \_\_\_\_\_ State/Province: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Occupation: \_\_\_\_\_

Spouse/Children: \_\_\_\_\_

Years Racing: \_\_\_\_\_ Racing Experience & Highlights: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**CONTACT INFO**

Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Which Social Media platform(s) do you use for your race team? *(check all that apply)*

- Facebook     
  Twitter     
  Instagram     
  Snapchat     
  TikTok  
 Other \_\_\_\_\_

**CAR INFO**

Year: \_\_\_\_\_ Chassis: \_\_\_\_\_

Engine Type/Displacement: \_\_\_\_\_ Primary Fuel Used: \_\_\_\_\_

Engine Builder/Location: \_\_\_\_\_

**TEAM INFO** *(Please list first AND last names)*

Car Owner: \_\_\_\_\_ Crew Chief: \_\_\_\_\_

Team Members: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**SPONSOR INFO** *(Driver rosters will list as many sponsors as space allows)*

Primary sponsor (list ONE): \_\_\_\_\_

Secondary sponsor (list ONE): \_\_\_\_\_

Other sponsors: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# SPRINT CARS of NEW ENGLAND (SCoNE) 2024 ROOKIE APPLICATION



PLEASE COMPLETE ALL INFORMATION – PLEASE PRINT CLEARLY

Driver: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*NOTE: All Rookie approval requests are evaluated on an individual basis and in rare cases exceptions may be granted for approval. No driver shall assume he/she is eligible for Rookie status or benefits without receiving official approval from SCoNE management.*

## ROOKIE ELIGIBILITY REQUIREMENTS

Drivers requesting Rookie status in 2024 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 previous racing experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

RETURN FORMS TO: Sprint Cars of New England – 3274 VT Route 22A, Bridport, VT 05734 – Email: [sconesprintcars@gmail.com](mailto:sconesprintcars@gmail.com)