Dear Racers:

Welcome to the 2020 season at The Bullring at Las Vegas Motor Speedway. We are very excited for all the change in store for the new season. We are optimistic that these changes will bring new challenges for our racers and bring great racing to our fans.

This year we will have a Bullring Registration Day for all racers on February 8, 2020. Registration will take place from 8:00 a.m. to 3:00 p.m. at the Bullring credentials building. Please take notice: if you are not a member of the 2020 Bullring points season you will not receive end of the year Championship Series payouts or contingency programs throughout the year. 2020 Bullring members will benefit from free spectator gate tickets and other member benefits randomly throughout the year. The deadline to purchase your 2020 Bullring registration is April 18th, 2020. Also we will have our only 2020 Pre-Season Open Test session on Saturday, February 8, 2020 from 10:00 am to 6:00 pm, the cost is $125 per car and driver and $20 for crew members.

Again for this year we will not reserve any pit stall for the 2020 season. All pit stalls will be first come first served on a weekly basis. This should make racing more affordable for all racers.

We encourage everyone send their packets in the mail or to attend the Registration Day on February 8, 2020 in order to return this packet and pay for registration.

Within this packet is all the information needed to start the season for each racer. Please complete this paperwork as instructed, and bring it with you on registration day. If you are unable to attend, please mail your packet and payments to:

Las Vegas Motor Speedway  
Attn: The Bullring  
7000 Las Vegas Blvd North  
Las Vegas, NV 89115

In order to retain your 2019 car number all packets must be returned no later than February 8, 2020 at 3:00 pm.  
If you have any questions please contact Tim Richter, at trichter@lvms.com

Thank you!

Tim Richter  
Racing Operations Manager - Short Tracks
2020 REGISTRATION FORM INSTRUCTIONS

1. All Bullring Competitors must complete this entire form prior to racing.

2. A $45.00 registration fee is charged to competitors in all divisions. **Fees must be paid by April 18th, 2020 to be eligible for end of the year pay-out and rewards.**

3. No duplicate numbers will be permitted at any time in any division.

4. Each driver may only register one number per class.

5. Number may not consist of more than three (3) digits (letter/number combinations are allowed).

6. You must complete and return this form no later than February 8, 2020 in order to retain your number from the 2019 season.

7. The person completing this form must sign and date the front before it will be accepted by The Bullring.

Mail to:
Las Vegas Motor Speedway
Attn: Bullring
7000 Las Vegas Blvd. North
Las Vegas, NV. 89115
2020 REGISTRATION FORM
COMPLETE ALL LINES ON THIS FORM. DO NOT WRITE "SAME" ON ANY LINE.
ANY INCOMPLETE FORMS WILL NOT BE ACCEPTED AND WILL BE RETURNED.

DIVISION:
[ ] NASCAR: [ ] Modified [ ] Bomber [ ] Super Late Model [ ] Super Stock [ ] Pro Late Model
NASCAR License: Feature License Charger License Charger License Charger License Charger License
ANY PERSON WORKING ON YOUR CAR MUST HAVE A NASCAR CREW MEMBER LICENSE
[ ] INEX: [ ] Bandolero: [ ] Outlaw [ ] Bandit [ ] Legend: [ ] M [ ] P [ ] SP [ ] YL
[ ] LVMS: [ ] Skid Plate Cars [ ] Jr. Late Models

DRIVER INFORMATION:
(As it appears on NASCAR/INEX License)
DRIVER NAME: ______________________ BIRTH DATE: ____ / ____ / ____
RACING NAME: ______________________
STREET ADDRESS: ______________________
CITY: ______________________ STATE: __________ ZIP: __________
TELEPHONE NUMBERS HOME (____) _______ - _______ CELL (____) _______ - _______
EMAIL: ______________________

CAR OWNER INFORMATION:
CAR OWNER: ______________________ BIRTH DATE: ____ / ____ / ____
STREET ADDRESS: ______________________
CITY: ______________________ STATE: __________ ZIP: __________
TELEPHONE NUMBERS HOME (____) _______ - _______ CELL (____) _______ - _______

CAR INFORMATION:
TRANSPONDER # ______ ______ ______ ______ ______ ______ CAR #: ______
CAR BODY MAKE: ______________________ MODEL: ______________________
CHASSIS BUILDER: ______________________
ENGINE BUILDER: ______________________

IF A DRIVER WISHES TO BE CONSIDERED A ROOKIE, PLEASE CHECK HERE [ ] [ ]
* In order to be granted Rookie consideration, you may not compete in more than four (4) races in your selected division at The Bullring in any previous season. You must run a yellow stripe on your rear bumper as a rookie.

The team representative signing this application below agrees that all team members, including but not limited to driver, owner, crew chief, or crew members, will honor and follow all rules listed in the 2020 Bullring Rulebook.

Printed Name: ______________________ Date: ____ / ____ / ____
Signature: ______________________
PLEASE PRINT

Driver’s name ____________________________________________________________

Car No. __________________________ Class ________________________________

City you currently reside in ____________________________________________

Hometown (town where you were born/grew up) ____________________________

Age _______ Birthdate ___________ Occupation ____________________________

Primary sponsor (your car’s main sponsor) ________________________________

__________________________________________________________

Other sponsors ______________________________________________________

__________________________________________________________

Contact information

Telephone number: (_______) ________________________________

Do we have your permission to give your telephone number to local media (TV, newspaper) for interview purposes? ( ) Yes ( ) No

E-mail address ________________________________

Your website address __________________________

**Would you like to join the Bullring’s e-mail list? If you join, you will receive schedules, press releases, news, schedule changes, race results and points each week. ( ) Yes ( ) No**

Tell us something about you or your team that might interest the local media ________________

PLEASE RETURN THIS SHEET TO:
Media Relations Manager, Las Vegas Motor Speedway, 7000 Las Vegas Blvd. North, Las Vegas, NV 89115
Fax: (702) 644-7774
Request for Taxpayer Identification Number and Certification

Name (as shown on your income tax return):

Business name/disregarded entity name, if different from above:

Check appropriate box (or federal tax classification):

- Individual/sole proprietor
- C Corporation
- S Corporation
- Partnership
- Trust/estate

- Limited liability company. Enter the tax classification (C=S corporation, S=S corporation, P=partnership)

- Other (see instructions)

Exemptions (see instructions):

Exempt payee code (if any)

Exemption from FATCA reporting code (if any)

Print or type below:

See Specific Instructions on page 2.

Address (number, street, and apt. or suite no.)

City, state, and ZIP code

List account number(s) here (optional)

Requester's name and address (optional):

Las Vegas Motor Speedway
7000 Las Vegas Blvd, North
Las Vegas, NV 89115
(702)632-8213 phone (702)632-8235 fax

Part I  Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line 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 How to get a TIN on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

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 on page 3.

Signature of U.S. person

Date

General Instructions

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9. at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

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, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

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, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and 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.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,

- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,

- An estate (other than a foreign estate), or

- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners’ share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.