



PRIZE MONEY PAYOUT FORM

PAYEE DETAILS

Series:		Winnings should be paid to:	
<input type="checkbox"/> F4 U.S. Championship		<input type="checkbox"/> Driver	
<input type="checkbox"/> FR Americas		<input type="checkbox"/> Entrant/Team Owner	
<input type="checkbox"/> ProSRF3			
Car Number		Team Name	
Driver Name			

PAYMENT DETAILS

Please complete either the ACH or Check section.

ACH	Name on Account			
	Bank Name		Bank Routing Number	
	Account Number		Tax ID Number	
	<i>Facsimile, photocopied, or electronic signatures shall be treated as original signatures. I hereby authorize SCCA Pro Racing to make electronic funds transfers to the account above:</i>			
	Signature		Date	
	Print Name		Email	

Check	Name on Account			
	Mailing Street Address			
	Mailing City, State, Zip			
	Tax ID Number		Email	

TEAM OWNER AUTHORIZATION – for F4 U.S. or FR Americas only

Please complete if the prize money is NOT being paid to the Team Owner.

<i>Facsimile, photocopied, or electronic signatures shall be treated as original signatures. I hereby authorize SCCA Pro Racing to pay prize money as listed above:</i>			
Team Owner Signature		Date	
Print Name		Email	