



## Financial Reconciliation

Race: \_\_\_\_\_

Dates: \_\_\_\_\_

Completed By: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax or E-mail: \_\_\_\_\_

### **Sanction Fee(s)**

Regular \$100.00 \$ \_\_\_\_\_

Other \$150.00 \$ \_\_\_\_\_

### **NBRA Driver Fees**

\$15.00 X number of racers per day (Total for all days) \$ \_\_\_\_\_

**NBRA Dues Collected** Enclose NBRA Membership forms \$ \_\_\_\_\_

**Other** (Please list names, items, and amounts on back) \$ \_\_\_\_\_

### **Total to send to:**

**National Office 8124 Timber Fall Tr Fort Worth, TX 76131 \$ \_\_\_\_\_ (A)**

### **Clubs Copy**

Club check amount \$ \_\_\_\_\_

Personal Checks to NBRA amount \$ \_\_\_\_\_

Total amount sent \$ \_\_\_\_\_ (B)

**NOTE: Amounts A & B should match, if any above items are prepaid, marks as "PD"**