



Scorers Financial Reconciliation

To be completed for each event and sent to National Office

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 NBRA National Office

8124 Timber Fall Trl. 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"