



CRSA Sprints – 6328 Kelly Road – Sodus, NY 14551

585-370-6495 Phone – 315-483-0176 Fax

Hello all Drivers, Owners, Crew and Sponsors,

We'd like to welcome you to the 2025 CRSA Race season. Enclosed you will find forms for the 2025 season, including a:

- CAR Registration form
 - Fee will be \$45/car prior to March 16th, 2025. \$65/car after that during the season.
- Membership Registration form
 - Fee will be \$85 for Drivers or Owner/Drivers and \$55 for Owners, \$55 for Crew with Insurance and \$35 for Crew without Insurance.. ALL DRIVERS and CAR OWNERS must fill out and purchase a membership in addition to the car registration due to insurance and administration costs.
 - Membership cards will be honored as usual by race tracks who have agreed to extend their discounted pit pass price.
 - Note: Any drivers under the age of 16 please contact Mike Emhof via email, so we can send you a parental release form. This must be completed prior to the first race event.
- Driver Profile Information form
 - We'd like to request that all drivers fill this out as completely as possible. We will use this throughout the year w/track promoters, for newspaper articles, and the CRSA website.
 - We will try our best to get you and your sponsor's visibility this year.
 - Please return these promptly so we can update your profiles so we have up-to-date sponsor information for the announcers the first night of racing.
- W-9 or W-Forms for 1099's – ARE part of the Car Registration. The form must be completed.
- Rule Books – Not included. Will be downloadable in printable format from the CRSA website. We will have them available for pickup at the race shows we attend and in April at Races.

Please make checks payable to: CRSA Sprints

Mail completed forms and payment to:

Mike Emhof Motorsports, Inc.

6328 Kelly Road

Sodus, NY 14551-9502

We will be participating in the Syracuse and Woodhull race car shows in March 2025, and look forward to seeing you there.

Please watch the CRSA website: www.crsasprints.com, and/or CRSA Facebook and Twitter pages: "CRSA Sprint Car Tour" and "CRSASprints" for updates on specific dates/times.

We look forward to seeing you all this year!!!

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CRSA 2025 CAR/OWNER REGISTRATION

CAR # _____

With Release of Liability and Indemnity Provisions (Note: This form registers the car only)

PART 1: CAR/OWNER REGISTRATION - PLEASE PRINT INFORMATION

2025 Car Color: _____ Chassis Type: _____ Car Number: _____

Owner Name: Last _____ First: _____ MI: _____ DOB: _____

Owner MAILING Address: Street: _____ Town: _____

State: _____ ZIP: _____ Phone: _____

Owner Email: _____

PART 2 - PLEASE READ CAREFULLY BEFORE SIGNING

In consideration of acceptance by Mike Emhof Motorsports, Inc. (hereinafter "CRSA Sprints") of this Car/Owner Registration application, issuance of a license, my being permitted on the speedway or raceway premises of any CRSA membership event, or any of the foregoing during 2025, as Owner of the car being registered, I hereby agree to the following terms and conditions:

1. Owner acknowledges there are inherent risks associated with automobile racing activities and hereby expressly assumes all risks associated with attending and participating in automobile racing -related activities.
2. Owner acknowledges and agrees that it is their intent to expressly waive, release, remise, and forever discharge, agree to hold harmless and indemnify, Mike Emhof Motorsports, Inc., its owners, officers, directors, employees, and agents of any and all liability arising from any and all causes of action or demands, including but not limited to negligence, personal injury, economic loss and wrongful death claims, which may accrue to Owner, or their heirs, assigns, next of kin and personal representatives, from every loss, cost, damage and injury, (including death) that may be sustained by Owner's person and property while on, about and in route into or out of premises where CRSA sanctioned events are being held or promoted by Mike Emhof Motorsports, Inc..
3. Owner expressly releases Mike Emhof Motorsports, Inc. from any and all claims for personal injury, property damage and other related economic losses, even if caused by the negligence of its representatives, agents and/or employees.
4. Owner agrees to release, remise, and forever discharge and hold harmless and indemnify, the owners and lessees of premises on which CRSA sanctioned events are presented, the participants thereon, and the owners and/or sponsors and manufactures of all racing equipment used in CRSA sanctioned events, the officer, directors, agents employees and servants of all of them, including CRSA officials and all other CRSA members, of and from all liability, claims, actions, demands, causes of action and from any possible causes of action whatsoever including negligence of any of the foregoing that may accrue to me or my heirs, assigns, next of kin and personal representatives, from every and any loss, cost, damage and injury (including death) that may be sustained by my person and property while in, about and in route into and out of premises where CRSA sanctioned events are presented.
5. Owner grants to Mike Emhof Motorsports, Inc. and its members and officials, any rights to publish, produce, copyright, duplicate, reproduce upon hats, tee-shirts, and other such novelty items written articles about me, photos, and drawings of my likeness or of my racecar.

CAR # _____

6. Owner has read the foregoing and understands its contents and agrees that if any of the paragraphs or provisions of this contract are deemed illegal, or nonbinding, the rest of this document shall stand in full force and effect.
7. By signing below, Owner agrees to abide by and follow regulations and responsibilities set forth in the CRSA Sprints 2025 Rules and Procedure Manual. Owner further releases the officials of CRSA, Mike Emhof Motorsports, Inc. from damages resulting from their decisions and/or interpretations of the rules.

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

OWNERS SIGNATURE

DATE

Do not write below this line: **FEE: \$65 after March 16th \$45 Prior to March 16th**

Approved By: _____ Ck. No. or CASH _____ Fee Paid: _____

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Federal 1099 Information Form – 2025 Race Season

***** FEDERAL LAW REQUIRES MEM TO HAVE THIS IN OUR RECORDS *****

Earnings of \$600 or more per year during the CRSA race events receives a 1099 Misc. Income Form. The federal 1099 form will be issued by Mike Emhof Motorsports, Inc., at year end to you with a copy to the IRS as required by law.

WINNINGS MADE PAYABLE TO: OWNER or DRIVER (Please Circle One)

Name: _____

Please fill out the W9 form on the following page.

Request for Taxpayer Identification Number and Certification

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

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: 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 not 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) ► _____	4 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>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 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.

Sign Here	Signature of U.S. person ►	Date ►
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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.

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.

CRSA 2025 Membership Contract
With Release of Liability and Indemnity Provisions
(ALL Drivers MUST fill out this form and a purchase a membership)

CAR # _____

PART 1: MEMBER INFORMATION – PLEASE PRINT

Name: Last _____ First: _____ MI: _____ DOB: _____

MAILING Address: Street: _____ Town: _____

State: _____ ZIP: _____ Phone: _____

Email: _____

Emergency Contact Name: _____ Emergency Phone: _____

Drivers Only: Blood Type: _____ Allergies: _____

PART 2 - PLEASE READ CAREFULLY BEFORE SIGNING

In consideration of acceptance by Mike Emhof Motorsports, Inc. (hereinafter “CRSA Sprints”) of this Membership application, issuance of a license, my being permitted on the speedway or raceway premises of any CRSA membership event, or any of the foregoing during 2025, I hereby agree to the following terms and conditions:

1. Member acknowledges there are inherent risks associated with automobile racing activities and hereby expressly assumes all risks associated with attending and participating in automobile racing -related activities.
2. Member acknowledges and agrees that it is their intent to expressly waive, release, remise, and forever discharge, agree to hold harmless and indemnify, Mike Emhof Motorsports, Inc., its owners, officers, directors, employees, and agents of any and all liability arising from any and all causes of action or demands, including but not limited to negligence, personal injury, economic loss and wrongful death claims, which may accrue to Member, or their heirs, assigns, next of kin and personal representatives, from every loss, cost, damage and injury, (including death) that may be sustained by Member’s person and property while on, about and in route into or out of premises where CRSA sanctioned events are being held or promoted by Mike Emhof Motorsports, Inc..
3. Member expressly releases Mike Emhof Motorsports, Inc. from any and all claims for personal injury, property damage and other related economic losses, even if caused by the negligence of its representatives, agents and/or employees.
4. Member agrees to release, remise, and forever discharge and hold harmless and indemnify, the owners and lessees of premises on which CRSA sanctioned events are presented, the participants thereon, and the owners and/or sponsors and manufactures of all racing equipment used in CRSA sanctioned events, the officer, directors, agents employees and servants of all of them, including CRSA officials and all other CRSA members, of and from all liability, claims, actions, demands, causes of action and from any possible causes of action whatsoever including negligence of any of the foregoing that may accrue to me or my heirs, assigns, next of kin and personal representatives, from every and any loss, cost, damage and injury (including death) that may be sustained by my person and property while in, about and in route into and out of premises where CRSA sanctioned events are presented.

5. Member grants to Mike Emhof Motorsports, Inc. and its members and officials, any rights to publish, produce, copyright, duplicate, reproduce upon hats, tee-shirts, and other such novelty items written articles about me, photos, and drawings of my likeness or of my racecar.
6. Member has read the foregoing and understands its contents and agrees that if any of the paragraphs or provisions of this contract are deemed illegal, or nonbinding, the rest of this document shall stand in full force and effect.
7. By signing below, Member agrees to abide by and follow regulations and responsibilities set forth in the CRSA Sprints 2025 Rules and Procedure Manual. Member further releases the officials of CRSA, Mike Emhof Motorsports, Inc. from damages resulting from their decisions and/or interpretations of the rules.

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

SIGNATURE OF MEMBER

DATE

Please Circle One:

Driver

Owner

Crew

DRIVER's ONLY: Please provide Sponsor Name to be provided to Announcer:

Sponsor Name/Information: _____

Sponsor Name/Information: _____

Sponsor Name/Information: _____

Sponsor Name/Information: _____

Sponsor Name/Information: _____

Sponsor Name/Information: _____

Do Not write Below This Line

MEMBERSHIP FEE: Driver/Owner \$85, Driver \$85, Owner \$55, Crew \$55 w/Ins., Crew \$35 wo/Ins.

Card Issue Date: _____