

**HARE SCRAMBLE SANCTION APPLICATION
2018 - 2019 SEASON**

Promoter's Name: _____

Phone Number: _____

Billing Address: _____

Billing Email: _____

FTR Rules require that every promoter will have the opportunity to receive one sanction before a second sanction is received by a promoting club

Primary Event Date: _____

Primary Event Location: _____

Alternate Dates: _____

Second Event Date: _____

Second Event Location: _____

Alternate Dates: _____

\$700 FOR EACH SANCTION MUST BE INCLUDED WITH THIS FORM!!

IT IS UNDERSTOOD THAT BY REQUESTING AN FTR SANCTION, OUR ORGANIZATION MUST CONFORM TO AND FOLLOW ALL FTR RULES AT THE SANCTIONED EVENT.

Signed: _____ (Promoter's Representative)

Questions? Contact the Committee Chairman: HSchair@floridatrailriders.org

Check # _____ Date _____ Amount _____