



Tech DQ Form and Notification

Handler Name: _____ **QMA #** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Driver Name: _____

Club: _____ **Region:** _____ **Class:** _____

Date of DQ: _____

Infraction :

Date DQ will be up: _____

Tech Director: _____

National Tec Director: _____

Form must be filled out and sent to National Tech Director with- in 48 hours of the race event. Copy of this form will be mailed (from the club or region the infraction took place in) to the Handler as notification of the infraction and date the DQ will be lifted.

National Tech Director use only:

Copy sent to home office

Copy Sent to Handler