



REQUEST FOR RULE CHANGE



Name: _____

Please list at least one contact method- required for request to be valid.

Phone: _____

Fax: _____

Email: _____

Please note- all changes apply to the AMA Bonneville Supplemental Regulations only. Please use separate form for each rule change. DEADLINE for Requests- DECEMBER 1st 2009

Type of Rule Change (Please check one)

- Amendment of Current Rule
- Addition of a Rule
- Removal of a Rule

Rule Information (please complete where applicable)

Rule Title: _____

Chapter Number: _____ Rule Number: _____ Rule Book Edition: _____

Reason for Change (please use additional paper if needed):

Proposed Amendment (please use additional paper if needed):

Office Use Only:

Date Received ___/___/20___

Reviewed by

- BUB Action
- Accepted
 - Further Develop
 - Denied

Signed: _____

- AMA Action
- Accepted
 - Further Develop
 - Denied

Signed: _____

To lodge request:
 Post: BUB Racing Inc
 180 Spring Hill Dr
 Grass Valley, Ca, 95945
 USA

DEADLINE- DECEMBER 1st 2009
 Fax: 530-477-6386
 or