BMW CCA DRIVING INCIDENT REPORTING FORM

Submit to BMW CCA National Office within 48 hours of the event.

For internal BMW CCA use only.

| Date of incident: | | | D | riving School | Autocross | Other | | |
|---|---------------|----------|-------------------------|-------------------------|-----------|-------|--|--|
| Track: | | | or Autocross/Tour site: | | | | | |
| Chapter: | | | | | | | | |
| Event Info: | # of students | | # of instructors | Include Club I | Race? Yes | No | | |
| Driver: | Student | | Instructor | Name: | | | | |
| Passenger: | Stude | nt | Instructor | Name: | | | | |
| Level of driving school experience (# of previous schools): | | | | | | | | |
| Student: | 0 | 1-3 | 4-8 8+ | Name: | | | | |
| Instructor: | 0 | 1-3 | 4-8 8+ | Name: | | | | |
| Vehicle: | Make: | | Model: | | Year: | | | |
| Tires: | Street | Compound | Soft "R" Cor | Soft "R" Compound Mixed | | | | |
| Vehicle modifications (Check all that apply): | | | | | | | | |
| Suspensio | on | Brakes | Software | Engine | Race car | | | |
| Was there a mechanical failure?YesNoIf yes, describe:YesYes | | | | | | | | |
| When during the school did the incident occur? | | | | | | | | |
| Day: | | One | Two | Three | | | | |
| Session: | | One | Two | Three | Four | | | |
| Visibility at time | e of inc | ident: | | | | | | |
| Good | | Fair | Poor | | | | | |
| Track condition of time of incident: | | | | | | | | |
| Dry | | Damp | Rain | Snow | Fluid on | track | | |

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Any injuries requiring medical treatment?

Yes No If yes, please describe:

If serious injuries occurred, you must contact AmWins Motorsports immediately! AmWins can be reached at (260) 437-3389. IN ADDITION, you must telephone the Executive Director IMMEDIATELY if the incident involves EITHER: (a) bodily injury requiring emergency transportation to a hospital; OR (b) anyone who expressly or impliedly threatens to make a claim, file a lawsuit or retain an attorney for any reason whatsoever. <u>Also: please submit a copy of the release waiver.</u>

Number of vehicles involved in incident:

Extent of damage to the vehicle (your judgment for BMW CCA purposes only):

| Superficial | Minor but drivable | Moderate but repairable |
|----------------------|--------------------|-------------------------|
| Major but repairable | Total loss | |

Description of incident (Check ALL that apply):

| Hit Wall or guardrail | Hit ditch/embankment | Hit another vehicle |
|------------------------|------------------------|-------------------------|
| Rollover | Spin to inside | Spin to outside |
| Off track and returned | Drove off track inside | Drove off track outside |

Description of factors believed to contribute to incident (Check ALL that apply):

| Sudden braking | Sudden lift | Sudden Acceleration | |
|-----------------------|--|---------------------|--|
| Sudden steering input | Entry speed too fast | Exit speed too fast | |
| 2 wheels off | Over-correction | Driver off line | |
| Mechanical failure | Slick surface (coolant, rain, "marbles") | | |

Brief description of incident:

Chapter representative completing form:

Telephone:

Please submit signed waivers for those involved.

Email:

Please submit this form within 48 hours of the event to: Executive Director 640 South Main Street, Suite 201, Greenville, SC 29601 (864) 250-0022 (864) 250-0038 (fax)