



# TOYOTA BONUS BUCKS OWNERS TOURNAMENT

**You must complete information below for each team member.** In addition, each team member must complete and sign the Event Waiver Forms (3 total), and the Toyota Bonus Bucks participant must submit a copy of their current truck registration and / or title. Submit the completed Tournament registration form, the signed event waivers, and the current vehicle registration and / or title by **10/7/22** via email or U.S. Mail to: Toyota Bonus Bucks Program Office-4860 S. Lewis Avenue, Tulsa, OK 74105  
Email: [bonusbucks@dynamicssponsorships.com](mailto:bonusbucks@dynamicssponsorships.com)

**TEAM:** PLEASE PRINT AND COMPLETE ALL INFORMATION REQUESTED BELOW. THANKS.

**ANGLER 1 (Current Toyota Bonus Bucks Member)**

ANGLER NAME: \_\_\_\_\_ DATE FAXED: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_  
 EMAIL ADDRESS: \_\_\_\_\_  
 CELL PHONE NUMBER: \_\_\_\_\_

Is this a Toyota Plant Team registration?  YES  NO If Yes, please note Toyota Plant (Ex: TMMMS): \_\_\_\_\_

Type / Year of Tow Vehicle (Ex: Toyota Tundra 2022): \_\_\_\_\_

\*Per tournament rules, at least one member of the team must be a current Toyota Bonus Bucks Program member, and team must use the Bonus Bucks team member's registered tow-vehicle for this tournament event. If you tow with an ineligible tow-vehicle, you will be disqualified from this tournament. Amateur teams only-Bassmaster Elite, MLF BPT and MLF Pro Circuit Pros are not eligible to participate.

VIN#: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

ANGLER NAME: \_\_\_\_\_ DATE FAXED: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_  
 EMAIL ADDRESS: \_\_\_\_\_  
 CELL PHONE NUMBER: \_\_\_\_\_

Is this a Toyota Plant Team registration?  YES  NO If Yes, please note Toyota Plant (Ex: TMMMS): \_\_\_\_\_

Type / Year of Tow Vehicle (Ex: Toyota Tundra 2022): \_\_\_\_\_

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VIN#: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

**QUESTIONS:** PLEASE ANSWER ALL TO COMPLETE REGISTRATION. THANKS.

**ANGLER 1**

I would like to receive information on Toyota special offers, exciting news and new product announcements.

Check here if you would like a Toyota dealer to contact you.

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Which models of Toyota vehicles are of most interest to you?  
(Please select up to two.)

- 4Runner
- Land Cruiser
- Supra
- Avalon
- Mirai
- Tacoma
- Camry
- Prius
- Tundra
- C-HR
- RAV4
- Yaris
- Corolla
- Sequoia
- 86
- Highlander
- Sienna

What is the make and model of your primary vehicle? \_\_\_\_\_

When do you plan to purchase or lease your next vehicle?

- Less than 1 month
- 1-3 months
- 4-6 months
- 6-12 months
- 1-2 years
- 2+ years

**ANGLER 2**

I would like to receive information on Toyota special offers, exciting news and new product announcements.

Check here if you would like a Toyota dealer to contact you.

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Which models of Toyota vehicles are of most interest to you?  
(Please select up to two.)

- 4Runner
- Land Cruiser
- Supra
- Avalon
- Mirai
- Tacoma
- Camry
- Prius
- Tundra
- C-HR
- RAV4
- Yaris
- Corolla
- Sequoia
- 86
- Highlander
- Sienna

What is the make and model of your primary vehicle? \_\_\_\_\_

When do you plan to purchase or lease your next vehicle?

- Less than 1 month
- 1-3 months
- 4-6 months
- 6-12 months
- 1-2 years
- 2+ years

BOTH ANGLERS MUST COMPLETE IRS FORM W-9 BELOW. THIS IS A U.S. GOVERNMENT FORM AND THE INFORMATION WILL BE REPORTED TO THE INTERNAL REVENUE SERVICE.  
YOU ARE SUBJECT TO FEDERAL PROSECUTION FOR FRAUDULENT COMPLETION.

Form <b>W-9</b> <small>(Rev. October 2007) Department of the Treasury Internal Revenue Service</small>	<b>Request for Taxpayer Identification and Certification</b>	Give this form to the requester. Do NOT send to the IRS.
Name		Requestor's name & address (optional)
Please check appropriate box: <input type="checkbox"/> Individual/Sole proprietor		
Address (number and street)		List account number(s) here (optional)
City, State and ZIP Code		
<b>Part I</b>	<b>Taxpayer Identification Number (TIN)</b> Enter your taxpayer identification number in the appropriate box. For individuals and sole proprietors, this is your social security number.	<b>Part II</b>
	Social Security Number ____-____-____	For Payee Exempt From Backup Withholding (See instructions)

**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).

**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.

Sign Here	Taxpayer Signature	Date
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Form <b>W-9</b> <small>(Rev. October 2007) Department of the Treasury Internal Revenue Service</small>	<b>Request for Taxpayer Identification and Certification</b>	Give this form to the requester. Do NOT send to the IRS.
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Please check appropriate box: <input type="checkbox"/> Individual/Sole proprietor		
Address (number and street)		List account number(s) here (optional)
City, State and ZIP Code		
<b>Part I</b>	<b>Taxpayer Identification Number (TIN)</b> Enter your taxpayer identification number in the appropriate box. For individuals and sole proprietors, this is your social security number.	<b>Part II</b>
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