

# San Francisco Region SCCA 2006 Official Entry Form

All events are sanctioned by the Sports Car Club of America, operated by the San Francisco Region and held under the SCCA General Competition Rules.

Event date	Track	Sanction #	Office use
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Circle event type

Regional      National      Reg/Natl      Dbl Reg      Dbl Nat

SCCA Member #	Exp. Date	Car Class	Number Choices:	
Driver Name		Make	Year	1. _____ <input type="checkbox"/> My permanent #
Address		Model		2. _____
City	State	Zip	Engine cc:	3. _____ Primary color:
Day phone ( )	Sponsor:			
Fax ( )	(22 letters max.)			
E-mail	Transponder #			
Circle SCCA license type below. Region _____	Entry cannot be processed without transponder number.			
SCCA: Novice      Regional      National      Pro	<input type="checkbox"/> I need a rental transponder (\$50)			
Other approved license (see GCR list):	Payment			
Entrant Name	Race Entry Fee \$ _____			
SCCA Member #	Exp.	Spec Racer Ford/FSCCA/SRSCCA Compliance Fee (\$10 per sanction #) \$ _____		
Address	Dual entry (\$150) \$ _____			
City	State	Zip	Late Fee (\$30) / Post Fee (\$50) \$ _____	
Circle payment type	Cash	Check # _____	Transponder Rental (\$50) \$ _____	
Visa      MasterCard      CC Exp. Date _____	Worker Appreciation Fund (optional) \$ _____			
Card #	Total payment \$ _____			
Office Use	Entry Fees:    Infineon      Laguna      Thunderhill			
Received	Amount	Check #	Regional      \$250      \$295      \$210	
			National      \$325      \$295	
			Reg/Natl Com. \$450	
			Double Reg      \$450      \$350	
			Double Nat'l      \$395	

Send entry to: SFR SCCA - PO Box 966 - Willows, CA 95988      Entry may be faxed if paying with Mastercard/Visa. Phone: 530-934-4455 x100      Fax: 530-934-7275

It is hereby understood and agreed that the undersigned and the car described herein are to appear at the above event to compete under the current SCCA General Competition Rules and Supplementary Regulations pertaining to the event. I certify that my car complies with the SCCA regulations. I have thoroughly read the instructions and entry form, and I hold the appropriate license for the event. I further waive all rights and so release unto the sponsor(s) and the SCCA the use of my name and photographs of myself and my car for publicity and promotional purposes. I further hold harmless SCCA and its workers and officials for damage to my vehicle(s) and equipment.

If I have rented a transponder, I assume full financial responsibility for this transponder. In the event that it is not returned in its original condition, I agree to pay full retail value for it (\$350). I agree to return the transponder to Race Administration before leaving the track. If the transponder is not returned at the end of the event, I agree to pay a \$50 per day fee until the transponder is received at the Region Office. If the late fee due becomes more than \$350, I agree to pay \$350 for the transponder and need not return it.

I HAVE READ AND AGREE WITH WITH THE ABOVE TERMS.

Driver signature \_\_\_\_\_ Entrant signature \_\_\_\_\_

Entry must be signed by driver and entrant (if applicable) to be processed.

Driver Medical Information	Name	Member #	Group & Car #
Blood type & RH factor (+/-)	Current medications		
Last Tetanus shot (approx. date)	Allergies, prosthesis, etc.		
Emergency Contact Name	Phone		