



# Competition License Application and Renewal

[Click here](#) for online renewal or [www.scca.com](http://www.scca.com)

Please read instructions on back before completing application.

Change of Address?  Yes

Membership No: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Home: \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Work: \_\_\_\_\_

Country: \_\_\_\_\_

### Check the License you are applying for:

- Full Competition \$100.00       Vintage Competition \$60.00

**Special Handling Service\* Additional \$125.00**

*\*24 hour processing if received by 3:00 PM CST. Includes copy of your license to be faxed or emailed and original sent overnight express delivery.*

**Standard Processing/Overnight Delivery Additional \$35.00**

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

**SCCA Overnight Address:**

**6620 SE Dwight St**

**Topeka, KS 66619**

### Required Participation

(must be completed in order to receive a license)

List only those events which meet the participation requirements stated on the reverse side.

EVENT DATE MM-DD-YY	TRACK	SANCTION # (For Vintage, List Sanction Body)	CAR CLASS	FINISHING POSITION
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### SEE PHYSICAL EXAMINATION REQUIREMENTS ON REVERSE SIDE

I hereby certify that the information above is correct. I realize any falsification will result in the loss of my SCCA Competition License. Additionally, I agree to abide by the provisions of the SCCA General Competition Rules and/or Pro Racing Rules and Regulations, as well as all applicable event Supplementary Regulations. By accepting membership in the SCCA all members agree to conduct themselves according to the highest standards of behavior and sportsmanship in a manner that shall not be prejudicial to the reputation of the Club or fellow members.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Method of Payment

- Check       Money Order       Credit Card:

Visa / MasterCard/Discover/AmEx/Diners Club Acct# \_\_\_\_\_ Exp. \_\_\_\_\_ Security Code \_\_\_\_\_

Total Amount Enclosed \$ \_\_\_\_\_

Applications submitted by fax must be accompanied by a Visa/MasterCard/Discover account number for payment.

SCCA Member Services - P.O. Box 299, Topeka, KS 66601-0299 - 1-800-770-2055 - 785-232-7213 Fax - [membership@scca.com](mailto:membership@scca.com)

# Instructions & Requirements

For Safe Keeping, Photo Copy All Correspondence Prior To Mailing

## Requirements for ALL Applicants

1. Current SCCA Membership.
2. Current SCCA Examination and Medical History form which must be on file at the SCCA National Office when applying for a competition license. The Official SCCA Physician's Examination/Medical History form can be found at [www.scca.com](http://www.scca.com) - found in the Road Racing, General Downloads section or you may call Member Services at (800) 770-2055.
  - (Every blank on the Physician's Examination/Medical History MUST be completed. The examination date cannot be more than 6 months before the Competition License or Permit application date.)
  - Any known medical conditions which could affect your ability to compete must be immediately reported to SCCA member services per GCR 2.3.2.

### **Examination and Medical History Requirements for renewals -**

**14-39 years of age every five (5) years**

**40-49 years of age every three (3) years**

**50-69 years of age every two (2) years**

**70 years of age and older every year**

3. Completed Application
4. MINOR Applicants 16 or 17: New applications MUST be accompanied by a completed [Minor Release & Waiver of Liability and Indemnity Agreement](#), plus the [Minor's Assumption of Risk Acknowledgement form](#). ***Certain states may impose higher age limits and all license applicants must be of the age of majority for the state they reside in. These forms must be on file at National Office before applicants receive his/her license.*** Minors ages 14 or 15 have additional requirements, refer to the GCR Appendix C 2.6 *14 and 15 year old Novice Permit and Licensing.*

## Current GCR

A hard copy is no longer required, but an electronic version is available online at [www.scca.com/pages/cars-and-rules](http://www.scca.com/pages/cars-and-rules).

## Competition License Terms

The SCCA Competition License indicates the month and year of expiration. This expiration date coincides with the Membership anniversary date. ALL licenses expire on the same date as the Membership anniversary date, and BOTH must be renewed when they expire. Renewal of a Competition License is not automatic with Membership renewal.

## New Full Competition License Participation Requirements

### **Vintage & Full**

- Completion of one of the following.
  - a. One (1) SCCA Driver School or approved equivalent\*, and (3) SCCA Regional events or approved equivalent\*, within the preceding 24 months. Send completed original Novice Permit logbook, containing Chief Steward's signature of approval.
  - b. "Certificate of Compliance" from a Full Competition level SCCA accredited professional driving school recommending the applicant for a Full Competition license. These schools are found [here](#).

*\*Approved equivalent includes a "Certificate of Compliance" from a SCCA accredited professional drivers school program that provides credit for the SCCA driver school requirement and in some cases credit for SCCA regional events. Please refer to the detailed list of SCCA accredited schools found [here](#).*

**Prior Racing Experience** - May be accepted in total or in part by the Divisional Licensing Administrator of the applicant's Division of Record or the Director of Road Racing. Submit application to Member Services with appropriate license fee.

## Competition License Renewal Participation Requirements

- Vintage** - Completion of at least two (2) Vintage or SCCA sanctioned Regional events in the preceding 12 months.
- Full** - Completion of at least one (1) SCCA U.S. Majors Tour or Regional sanctioned race/Pro/FIA weekend per year.

## Applicants With Less Than The Minimum Participation Requirements

Submit a letter of explanation, competition resume, Physician's Examination/Medical History (see requirements above), competition application and proof of SCCA membership to the Divisional Licensing Administrator for review. Contact information about your Divisional Licensing Administrator can be found [here](#) or call Member Services at (800) 770-2055.