

Spring Sprints Double Regional Races Detroit/South Bend/Western Ohio Regions, SCCA

Event Dates:

May 16 – May 17, 2015

OFFICIAL ENTRY FORM

GingerMan Raceway
South Haven, Michigan

Make Check/Money Order Payable to:

SOUTH BEND REGION, SCCA

Mail to:

- Both Days Entry Fee \$350.00 postmarked before 5/8/15, \$400.00 after 5/8/15 BECKY SUHR, REGISTRAR
- Saturday Entry Fee \$250.00 postmarked before 5/8/15, \$300.00 after 5/8/15 450 Sycamore Springs Dr.
- Sunday Entry Fee \$200.00 postmarked before 5/8/15, \$250.00 after 5/8/15 Springboro, OH 45066-8949
- SRF, FSCCA, SRSCCA + \$20.00 (per weekend) (937) 550-3287 (before 10:00 PM EDT...please)
- Weekend Membership Fee \$15.00 (if not an SCCA member)
- Additional dinner tickets: quantity ____ @ \$5.00 each
- Worker fund donation: Amount \$ ____

Make	Model	Color	Year	Class/Category	Official Use Only
Transponder #				Car # Request 1 st ____ 2 nd ____ 3 rd ____	
Driver Name				SCCA Member #	
Address				Phone	
City		State	Zip:		
Email address					Car No.
Competition License No.		License Grade	Region of Record		
In Emergency Notify				Phone	
Address				At Track ? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Entrant's Name (if not driver)					
Sponsor's Name					
Crew:	1. FREE _____		4. \$10.00 _____		Postmark
	2. FREE _____		5. \$10.00 _____		
	3. FREE _____		6. \$10.00 _____		
I hereby agree that the car and driver, as described above, will appear at this event to participate under the current General Competition Rules & Amendments of the Sports Car Club of America, Inc. & Supplementary Regulations of this event. The car entered complies with all requirements for the class and category in which it is entered and that all of the information provided is valid and accurate.					
Fee Rec.					

Entrant/Owner <small>(If other than Driver)</small> _____	Driver: _____
(Signature)	(Signature)
Entrant's Member # & Address	

In Emergency Notify	Phone
Address	At Track ? <input type="checkbox"/> Yes <input type="checkbox"/> No