Glen Region SCCA presents 2014 July Sprints

Watkins Glen International Race Track - July 19/20, 2014

Regional Races held under the Sports Car Club of America General Competition Rules and these Supplemental Regulations.

SCCA Sanction #14-R-3135-S SCCA Sanction (ProIT) #14-OGR-3136-S

DRIVER INFORMATION (Please Print)								OFFICIAL USE ONLY	
Name:				Date of Birth:			Į.	REGIONAL RACE GROUP:	
Address (Street,City,State,Z	ip):								
Email:				Phone: ()				CAR #:	
SCCA License #:			Region of Record:						
License Grade:				Expiration Date:				POSTMARK:	
		EMER	RGENCY CON	ITACT					
Name:				At the track? Where?			Ī	DATE RECV'D:	
Address (Street,City,State,Z									
Phone: ()				Relationship:				AM'T RECV'D:	
SPONSOR (if different f				rom driver)					
Sponsor Name:				SCCA Mbr #:			F	POSTED:	
Address (Street,City,State,Zip):									
Phone: () Sponsor:								COMMENTS:	
CAR INFORMATION									
ear/Make/Model:			Class:						
Desired Numbers:				Color:					
Transponder number									
CREW INFORMATION									
Name:			SCCA Mbr #:						
Name:			SCCA Mbr #:						
Name:			SCCA Mbr #:						
Name: SCCA Mbr #: ENTRY FEES (Make checks payable to Glen Region SCCA, Inc.)								A Company	
Primary Entry Fee \$ 325 CASH [] CHECK [] *MC [] *VISA [Mail this COMPLETED Entry Form to:	
Primary Entry ProIT \$ 350									
Secondary Entry (same car/driver, diff class) \$200									
SRF, FE Compliance Fee: add \$10.00									
Late Entry Fee (after midnight, July 18, 2014): add \$50.00								Glen Region SCCA, Inc.	
Overcrew: Number over allowance X \$10.00 each								Terri Dobbs, Registrar	
Garage Fee: (SEPARATE CHECK!) add \$95.00 (1st come/1st served per postmark, non-refundable)								611 Hatfield St. Horseheads NY 14845	
Worker Donation (optional)								Email:	
Transponder Donation add S	\$50							terriracyhair@gmail.com	
*Credit Card #:					TOTAL			Phone: 607-425-4339	
*Name:			*Exp. Date: AMOUNT:						
			SIGNATURES					Express Mail, FedEx, UPS	
		ed that the und General Comp						Accepted only if NO signature is required.	
Driver:			Date:						
Entrant:				Date:					
TIMING & SCOR							1,	OFFICIAL USE ONLY REGIONAL RACE GROUP:	
Name:			Hometown/State:				ALGIONAL NACE GROUP:		
Transponder #:				Color:				2AD #-	
Class:				Sponsor:				CAR #:	
Car Make / Yr:	T								
Mbr #:	Region of Red	cord:					- 11		

REGIONAL ENTRY FORM