

California Sports Car Club

Entry Form

(Entry Form is not considered complete until all fields are filled)

Event: Cal Club National Double Rest'd Regional		Date: June 2-4, 2006		Late Entry Deadline: May 27, 2006		Sanction #s: 06-N-48-S, 06-RS-155-S, 06-RS-156-S		Track / Location: California Speedway				
<input type="checkbox"/> National <input type="checkbox"/> Regional <input type="checkbox"/> National/Regional <input type="checkbox"/> Test Day												
Log Book ID		Make	Model		Year	Color		Class		Car Number Choices		
										1 st	2 nd	3 rd
Transponder # - Required						E-mail			Registrar Use Only			
Driver's Name (Please print legibly)						Daytime Phone			Run Group			
Address						Evening			Car #			
City			State	Zip Code		Fax			Class			
Membership Number			Expiration Date		License Grade					Member/License OK		
					<input type="checkbox"/> Reg <input type="checkbox"/> Nat <input type="checkbox"/> Dual <input type="checkbox"/> FIA <input type="checkbox"/> Novice							
Region of Record		Cal Club Associate or Lifetime Member? Yes No			If Renting, From Whom?				Tech Card Given?			
Entrant (if different than driver)					Entrant Member # AND Expiration Date					Waiver Signed?		
Name										Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card		
Address												
City, State, Zip												
Sponsor(s)												
In Emergency, notify?						Phone			At Track? Yes No		Total Paid	
CIRCLE PAYMENT TYPE, PAYABLE AT REGISTRATION (IF PAYING WITH A CREDIT CARD, BRING CARD TO REGISTRATION.)												
CHECK		VISA		MASTERCARD		CASH						
CARD #				EXPIRATION DATE:								
<p>It is agreed that the entry, if accepted, shall be a contract between the Driver/Entrant & the SCCA/California Sports Car Club Region under which the above car & driver will take part in the competition described, unless prevented by force beyond control of the Driver/Entrant. This event will be conducted under the SCCA 2006 General Competition Rules & California Sports Car Club 2006 Supplementary Regulations and the Entrant & Driver agree to abide by these rules. All participants must sign a release agreement at Registration before entering the track facility.</p>												
DRIVER SIGNATURE _____						ENTRANT SIGNATURE _____						
	Entry Fees:		SRF/FSCCA/SCCASR Fees:		Late Fees:		Total Fees:		PLEASE SEND ENTRY TO: Cal Club Office Manager California Sports Car Club 18202 Cal Club Drive Buttonwillow, CA 93206 Phone: 661.764.5945 Fax: 661.764.5944 E-Mail: calclubgm@aol.com Call Club Office for garage rental \$100 per space, \$200/door			
Regional	\$250		\$ 10		\$40		\$ _____					
Double Regional	\$ 320		\$ 20		\$40		\$ _____					
National	\$300		\$ 10		\$40		\$ _____					
National/Regional	\$500		\$ 20		\$40		\$ _____					
Garage	\$100 Half		\$200 Door				\$ _____					
Test Day	\$125/Half 1-5		\$200 Full				\$ _____					
Worker Donation							\$ _____					
					TOTAL		\$ _____					

California Sports Car Club 2006 Medical Form

Driver Medical Information – Driver must complete ALL questions

Please write legibly

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Driver's Name	Date of Birth	Blood Type	Date of Last Tetanus	Registrar Use Only
Driver's Address, City, State & Zip		Daytime Phone		Run Group
		Evening		Car #
Drug Allergies or Medical Conditions		Illness/Injury from Past 12 months		Class
Current Medications				
Physician's Name		Address		Phone
Yes or No:	Contacts	Dentures	Asthmatic	Diabetic
	Hemophiliac	Heart Problems	Allergies	Organ Donor
In Emergency Notify?		Phone	At Track: Yes No	Religious Preference
I certify that the medical information provided by me is true and accurate.				
Driver's Signature: _____ Date: _____				

**A COMPLETE MEDICAL FORM MUST BE FILLED OUT FOR EACH
RACE IN ORDER FOR YOUR ENTRY TO BE VALID.**