

California Sports Car Club

Double Regional

August 30-31

Event: Double Regional	Date: August 30-31	Late Entry Deadline: August 24, 2008	Sanction #: 08 R 300 S 08 R 301 S	Track / Location: BUTTONWILLOW RACEWAY PARK
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Log Book ID	Make	Model	Year	Color	Class	Car Number Choices		
						1 st	2 nd	3 rd

Transponder # - Required	E-mail	Registrar Use Only
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Driver's Name (Please print legibly)	Daytime Phone	Run Group
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Address	Evening	Car #
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City	State	Zip Code	Fax	Class
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Membership Number	Expiration Date	License Grade <input type="checkbox"/> Reg <input type="checkbox"/> Nat <input type="checkbox"/> Dual <input type="checkbox"/> FIA <input type="checkbox"/> Novice	Member/License OK
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Region of Record	Cal Club Associate or Lifetime Member? Yes No	If Renting, From Whom?	Tech Card Given?
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Entrant (if different than driver) Name Address City, State, Zip	Entrant Member # AND Expiration Date	Waiver Signed?
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Sponsor(s)	Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Check # <input type="checkbox"/> Credit Card
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In Emergency, notify?	Phone	At Track? Yes No	Total Paid
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CIRCLE PAYMENT TYPE, PAYABLE AT REGISTRATION (PLEASE, BRING CARD TO REGISTRATION.) <input type="checkbox"/> CHECK <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> CASH CARD # _____ EXPIRATION DATE: _____	\$ _____ Registrar Initials
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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 2008 General Competition Rules & California Sports Car Club 2008 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.

DRIVER SIGNATURE _____ ENTRANT SIGNATURE _____

	Entry Fees:	SWSRF/ FSCCA/ SCCASR Fee per Race:	Late -Fees: 8-24-08	Total Fees:	PLEASE SEND ENTRY TO:
Dbl. Regional	\$300.00	\$10.00 per race	\$40.00	\$ _____	Cal Club Registrar 4743 Canehill Ave. Lakewood, CA 90713 Phone: 661.764.5945 Fax: 562-421-4598 E-Mail: calclubhq@aol.com
Single Regional	\$210.00	\$10.00 per race	\$40.00	\$ _____	
			Worker Donation	\$ _____	
			TOTAL	\$ _____	
				\$ _____	