

Cal Club
Double Regional
Buttonwillow Raceway Park
September 5-6, 2009

Event: Double Regional	Date: September 5-6,2009	Late Entry Deadline: August 30,2009	Sanction #: 09-R-746-S/09-R-747-S	Track / Location: BUTTONWILLOW RACEWAY PARK 13 CW 2.68 Miles
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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 (<i>Please print legibly</i>)	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="radio"/> Reg <input type="radio"/> Nat <input type="radio"/> Dual <input type="radio"/> FIA <input type="radio"/> 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="radio"/> Cash <input type="radio"/> Check # <input type="radio"/> 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.) CHECK VISA MASTERCARD 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 2009 General Competition Rules & California Sports Car Club 2009 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:	SMSRF/FE Fee per Race:	Late -Fees: 8-30-09	Total Fees:	PLEASE SEND ENTRY TO:
Dbl. Regional	\$320.00	\$10.00 per race	\$40.00	\$ _____	Club Registrar 4743 Canehill Ave. Lakewood, CA 90713 Phone: 661.764.5945 Fax: 562-421-4598 E-Mail: calclubhq@aol.com
Single Regional	\$220.00	\$10.00 per race	\$40.00	\$ _____	
Dbl Regional/Dbl Dip	\$480.00	\$10.00 per race		\$ _____	
			Worker Donation	\$ _____	
			TOTAL	\$ _____	