



Race Official License Renewal/Application

REGIONAL Licenses renew automatically with membership renewal, there is no need to send application to SCCA National office

Office Use Only
Date Rcvd _____

Please complete the following:

Change of Address? Yes _____

Membership No: _____

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: (H) (____) _____ (W) (____) _____

E-mail: _____

For More information about Renewal/Upgrades go to SCCA.com and see "Guide to Obtaining a Racing Official License"

TO UPGRADE YOUR LICENSE(S) OR APPLY FOR A NEW LICENSE(S) COMPLETE THE REVERSE SIDE

LICENSE RENEWAL with PARTICIPATION REQUIREMENTS

REGIONAL RENEWAL: Automatic with Membership Renewal-No need to submit form.

DIVISIONAL RENEWAL: Six (6) days at SCCA Sanctioned events in the preceding 12 months. If you have multiple licenses please submit a separate application for each speciality.

NATIONAL RENEWAL: Eight (8) days at SCCA Sanctioned events in the preceding 12 months. If you have multiple licenses please submit a separate application for each speciality. (Race Administration exempt).

SENIOR RENEWAL: Must be approved by Divisional Administrator and Executive Steward every three (3) years. See reverse side.

If you have NOT met the renewal participation requirements, we will contact the Divisional Administrator for waiver of participation upon receipt of this form. Please allow an additional week for processing.

Specialty: _____ **Lic. Grade:** Divisional _____ National _____ Sr. _____

Participation

| Date | Event |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

I hereby certify that the information above is correct. I realize any falsification will result in the loss of the above-indicated license. Additionally, I certify that I am familiar with the SCCA rules and regulations governing the use of the above-indicated License and I agree to abide by those rules and regulations and all applicable SCCA policies.

Applicant's Signature: _____ **Date:** _____

FORWARD APPLICATIONS TO:

New/Upgrade SCCA Race Official License Application

NEW: PLEASE CHECK THE APPROPRIATE BOX(ES) FOR THE LICENSE(S) YOU WANT ISSUED. IF YOU ARE REQUESTING A REGIONAL LICENSE(S) FORWARD THE LICENSE APPLICATION TO MEMBER SERVICES. IF YOU ARE REQUESTING A DIVISIONAL, NATIONAL OR SENIOR LICENSE(S) FORWARD THIS APPLICATION TO YOUR DIVISIONAL ADMINISTRATOR

UPGRADE: PLEASE CHECK THE APPROPRIATE BOX(ES) FOR THE LICENSE(S) UPGRADE YOU ARE REQUESTING AND FORWARD THIS APPLICATION TO YOUR DIVISIONAL ADMINISTRATOR FOR APPROVAL.

NAME: _____ MEMBER NUMBER: _____

| SPECIALTY | REGIONAL | DIVISIONAL | NATIONAL | SENIOR |
|-----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Emergency Service Medical | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Emergency Service Fire/Rescue | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Emergency Service Course Marshall | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Flagging & Communications | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Pit/Grid | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Race Administration | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Registrar | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Scrutineer | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sound Control | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Starter | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Timing & Scoring | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

DIVISIONAL ADMINISTRATOR USE ONLY

DIVISIONAL ADMINISTRATOR

Application approved for (check one): National Divisional

Signature: _____ Date: _____ Division: _____

Please forward this application to the SCCA Member Services Department within one week after receiving.

EXECUTIVE STEWARD USE ONLY SENIOR LICENSE RENEWAL / UPGRADE

The Executive Steward must approve Senior License upgrade and/or Senior License renewal.
(Expires every three years)

EXECUTIVE STEWARD

Signature: _____ Date: _____ Division: _____

Please forward to the SCCA Member Services Department within one week after receiving.

NOTE:

NATIONAL/DIVISIONAL ADMINISTRATOR AND EXECUTIVE STEWARD

****UNAPPROVED APPLICATIONS****

***PLEASE FORWARD A LETTER OF EXPLANATION TO DENIED APPLICANTS AND
COPY THE SCCA MEMBER SERVICES DEPARTMENT - THANK YOU***