





Team/Car Information:

Team Name:					
Team Representative:		Phone Numb	er:		
Email:					
Car Number:					
Driver:Home Town:					
Sponsor:					
Event Select	ion:				
	April 8-9, 2017	Homestead			
	June 8-11, 2017	Indianapolis			
	July 6-9, 2017	СТМР			
	August 10-12, 2017	Mid-Ohio			
	August 25-27, 2017	VIR			
	September 14-16, 2017	СОТА			
_			mount of \$7800. day of the event. \$100 late fee will be added).		
	rmanent crew members (those	who have purchased annual l	hard cards). Please advise Registrar of		
Name 1:					
Name 2:					
Name 3:					
Name 4:					
Name 5:					



Payment:





2017 Championship Fee - \$7500/entry

I am paying the \$7500 Championship Fee. By paying this Championship Fee, I am eligible for Championship points and year-end Championship prize money, as well as (3) hard cards at no cost for my crew members. (\$85 SCCA Membership fee will still need to be paid to SCCA for crew member to receive hard card.). Any additional crew credentials will be \$200.

I am electing NOT to pay the \$7500 Championship Fee. I understand that by not paying the Championship Fee I am NOT eligible for year-end Championship prize money.

Check	Visa	Master Card		Discover				
Name on card:								
Credit card #:								
CCV:	Exp. Date:	Exp. Date:		Total due:				
Agreement: I, the undersigned, hereby apply for entry in the above event(s) and agree to abide by the SCCA Pro Racing Rules (PRR). If paying by credit card, I authorize SCCA Pro Racing to charge the event entry fee(s) to my credit card. I understand that prize money will not be paid if I do not have a current W-9 form on file with SCCA Pro Racing. Prize Money that remains unclaimed 12 months after the date of the event will be forfeited.								
Entrant Signature:	Date:							
Print Name:								
Submission:								
SCCA Pro Racing								
CherriLea Roduner								
6620 SE Dwight St., Topeka, KS 66619								
For questions, please email <u>croduner@sccapro.com</u> or call 785-862-7134.								