

SCCA Registration Fee: \$200 | Membership Fee: \$50-\$105

Name:				Member #:			
Team Name and/or Affiliation:							
Do you want to renew your membership in the same format as 2018 (First Gear, Individual, or Family)? Yes 🗆 No 🗅						No 🗆	
If no, please indicate which format do you want?							

The following is required for applicants. If you are a returning crew member and any information has changed, please update it.

DOB:			Social Media:				
Cell:			Cell Carrier:	Email:	Email:		
Street Address:							
City, State, Zip:							
Emergency Contact:				Emergency C	ontact Phone:		

The following information will need to be provided in addition to this form:

Emailed to Hannah Orme: <u>horme@sccapro.com</u>

Head shot photo

Mailed to SCCA Pro Racing, 463 Southpoint Circle, Unit 400, Brownsburg, IN 46112

- Release and Waiver of Liability (crew over 18 years old): an original, color copy of the waiver notarized or witnessed by an SCCA Pro Racing Registrar
- SCCA Minor Participant Waiver (crew 17-18 years old): an original, color copy of the waiver notarized or witnessed by an SCCA Pro Racing Registrar

Acknowledgement/Disclaimers:

The Applicant agrees to permit the SCCA Pro Racing and its assigns (including, but not limited to, subsidiaries, series sponsors,

promoters/organizers of the Event), free of any charges, duties or fees, to use, license, reproduce, have reproduced, show, have shown, without limitation in space or time, all drawings, soundtracks, photographs, trademarks, films/video pictures concerning competitors, their drivers, teams or cars involved in the event(s) on any medium whatsoever for any documents, reports, coverage, broadcast, program, publication, video game or model production, software, etc. whether past, present or future. The Applicant further acknowledges and agrees that SCCA Pro Racing may freely assign or License its rights to a third party.

Additional Comments:		
Crew Member Signature:		Date:

Payment Authorization Information

By providing the information below and signing your name, you authorize SCCA Pro Racing to charge your credit card \$200 for an F4 U.S./F3 Americas Crew Credential and the applicable SCCA Membership fee.

Name on Card:	Zip Code:		Phone:			
Card Number:		Exp. Date:			CCV:	
Signature:				Date:		