2019 EVENT ENTRY FORM



DDIVED.	/TEARA	INFORM	AATION
DRIVER	:/IFAIVI	INFORM	VI

Driver Name:	Hometown:	
Team Name:	Car Number:	
Owner/Entrant Name:	Cell Number:	
Owner/Entrant Email:		
Sponsor:		

EVENT SELECTION

Championsh	nip	Location	Date	Entry Fee
F3 Americas		Barber Motorsports Park	April 5-7	\$3000
F3 Americas	F4 U.S.	Michelin Raceway Road Atlanta – PROMOTER TEST	April 17	\$650
F3 Americas	F4 U.S.	Michelin Raceway Road Atlanta – EVENT	April 18-20	\$2000 – F4 \$2500 – F3
F3 Americas	F4 U.S.	Pittsburgh Int. Race Complex – SERIES TEST	June 18-19	\$1300
F3 Americas	F4 U.S.	Pittsburgh International Race Complex – EVENT	June 21-23	\$2000 – F4 \$2500 – F3
F3 Americas	F4 U.S.	VIRginia International Raceway	July 26-28	\$2000 – F4 \$2500 – F3
	F4 U.S.	Mid-Ohio Sports Car Complex	Aug 8-10	\$2500
F3 Americas		Road America	Aug 22-24	\$3000
F3 Americas	F4 U.S.	Sebring International Raceway – PROMOTER TEST	Sept 12	\$500
F3 Americas	F4 U.S.	Sebring International Raceway – EVENT	Sept 13-15	\$2000 – F4 \$2500 – F3
	F4 U.S.	Circuit of the Americas	Nov 1-3	\$3000

^{*}Entry deadline is two weeks before the first day of the event. A \$250 late fee will be added

PAYMENT INFORMATION

Name on Card:		
Card Number		
Expiration Date:	CCV:	
Billing Street Address:		
Billing City, State & Zip Code:		
Contact Email:	Contact Phone:	

I, the undersided, hereby apply for entry in the above event(s) and agree to abide by the Championship Sporting Regulations. 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-9/8 form on file with SCCA Pro Racing. Prize money that remains unclaimed 12 months after the date of the event will be forefitted. I, the undersigned, attest that no changes have occurred affecting the driver's medical form.

Owner/Entrant	Date:	
Signature:	Date.	