

THE FINGER LAKES REGION, SCCA, INC.

2000 Glen Nationals

WATKINS GLEN INTERNATIONAL RACE COURSE
 NATIONAL RACES HELD UNDER THE SCCA GENERAL COMPETITION RULES
 SCCA SANCTION # 00-N-36P JUNE 17-18, 2000

NAME: _____ DATE OF BIRTH: _____
 ADDRESS: _____ PHONE NO.: _____
 CITY/STATE/ZIP: _____ SCCA MEMBER #: _____
 COMPETITION LICENSE #: _____ NAT'L DUAL FIA (circle one)
 REGION OF RECORD: _____ LICENSE EXPIRATION DATE: _____
 IN EMERGENCY NOTIFY: _____ PHONE#: _____
 MAJOR SPONSOR: _____

ENTRANT (IF DIFFERENT THAN DRIVER:

NAME: _____ DATE: _____
 ADDRESS: _____ PHONE #: _____
 CITY/STATE/ZIP: _____ SCCA MEMBER #: _____

CAR PLEASE ENTER MY CAR AS FOLLOWS: (Please copy this data onto Medical & Timing forms below).

YEAR _____ MAKE _____ COLOR _____ CLASS _____
 DESIRED CAR NUMBER: 1ST _____ 2ND _____ 3RD _____

CREW (SEE SUPPLEMENTARY REGULATIONS FOR CREW ALLOWANCE)

CREW NAMES/SCCA MEMBER #/CREW LICENSE? CREW NAMES/SCCA MEMBER #/CREW LICENSE?
 1. _____ 2. _____
 3. _____ 4. _____

ENTRY FEES: MAKE CHECKS PAYABLE TO FINGER LAKES REGION, SCCA, INC.
DRIVER NAME AND MEMBERSHIP NUMBER MUST BE ON THE CHECK!

POSTMARK DEADLINE June 7, 2000

ENTRY FEE	\$200.00 per car for weekend	_____
LATE ENTRY	\$50.00 additional	_____
GARAGE RENTAL	\$60.00	_____
OVERCREW	\$10.00 per person	_____
SPEC. RACER Compliance Fee	\$10.00 per entry	_____
TRANSPONDER RENTAL	\$30 (\$300 deposit by sep. check required)	_____
	TOTAL	_____

MasterCard and VISA accepted - Card Number: _____ Exp. Date: _____

Account Holder Name _____ Account Holder Signature _____

SIGNATURES

IT IS UNDERSTOOD AND AGREED THAT THE UNDERSIGNED AND THE CAR DESCRIBED ABOVE ARE TO COMPETE UNDER THE GENERAL COMPETITION RULES AND THESE SUPPLEMENTARY REGULATIONS.

SIGNATURE DRIVER: _____

SIGNATURE ENTRANT: _____

MAIL ENTRY TO: Registrar, Judy Dennis, 33 Huntsman Way, Webster, NY 14580 PHONE: (716) 872-1503

Note: FED-EX, UPS and EXPRESS MAIL deliveries will only be accepted if no signature is required.

OFFICIAL USE ONLY
RACE GROUP
CAR NO.
POSTMARK
RECEIVED
AMOUNT REC'D
POSTED
COMMENTS
GARAGE NUMBER

(IMPORTANT: YOUR ENTRY WILL NOT BE ACCEPTED WITHOUT THESE COMPLETED FORMS)

OFFICIAL USE ONLY:			
RACE GROUP	CAR #	RACE GROUP	CAR #
MEDICAL INFORMATION		TIMING AND SCORING	
DRIVER'S NAME	AGE	CLASS	REGION
DRIVER'S HOME ADDRESS	PHONE:	COLOR	
	COLOR	DRIVER NAME	
	DATE LAST TETANUS BOOSTER	MEMBERSHIP #	LIC GRADE:
	RELIGIOUS PREFERENCE	CITY & STATE	
		CAR YEAR/MAKE/MODEL	
	NETES, HEART, BP)	ENTRANT/SPONSOR:	
	AM?	(20 characters max)	
	PHONE:	TRANSPONDER #	
		I WANT TO RENT A TRANSPONDER Yes No	
		(Transponders are in limited supply. First Come, First Serve.)	