SCSC 2020 Entry Form

ing on attending. If selecting multiple events, this will be considered your

Please check the race(s) you are planning on attending. If selecting multiple events, this will be considered your pre-registration. Note: If any information below changes a new form will need to be provided.

| pre-re | egistration | . Note: If any infor | mation below change | es a new torm wi | n need to be | e providea. | |
|--|---|---|---|---|-------------------------------|---|--|
| □ Lake Ming Regatta 3/14-3/15 □ Spring Classic 4/18-4/19 □ Long Beach Sprint Nationals 8/1-8/2 | | | | | | | |
| Lake Ming "Sh | oot Out" 10 | $0/3-10/4$ \square_{Tha} | nksgiving Regatta 11/ | 27-11/28 | | | |
| Owner Name | | | | | DOB | | |
| Address | | | | | | | |
| | | | | Zip Code | | | |
| Phone () | | E-mail Addre | ss (Very Important) | | | · | |
| Emergency Contac | t Name | | | Pho | one () | | |
| Life Jacket Mfg | | Capsule Jac | Capsule Jacket Other Helmet Mfg. | | Open Face Full Face | | |
| Driver Name (If different from Owner) | | | | | | | |
| Address | | | | | | | |
| City | | | State | | Zip Code | | |
| Phone () | | E-mail Addre | ss (Very Important) | | | | |
| Emergency Contact Name | | | | | | | |
| Life Jacket Mfg | | Capsule Jacket Other Helmet Mfg. | | | | | |
| Co-Driver/Rider Name DOB | | | | | | | |
| Address | | | | | | | |
| CityStateZip Code | | | | | | | |
| | | | | | | | |
| Phone ()E-mail Address (Very Important) Emergency Contact NamePhone () | | | | | | | |
| | | | Capsule Jacket Other Helmet Mfg. Open Face | | | | |
| circular fo C/O Jeann payable to Drivers m www.scsc | or pre-registratic Doidge, 1 of SCSC) or Coust read & single racing.com | ation deadline. Entry 0115 Gaviota Ave., Noted Card (credit card) ign release waiver at off f you would like to re | Office prior to the event of forms can be received by North Hills, CA 91343. It ds will be charged a \$10 check-in/registration. The ead prior to coming to the nsurance at time of regis | y e-mail jdsjmom@ Y ees can be paid at convenience fee). The release waiver can be race course. | aol.com, fax the race site | (818) 997-4278, or mail by Cash, Check (made | |
| Class | 1 | Boat Name | | | Motor Mfg. | C.I. Displacement | |
| | | | | | | | |
| | | | | | | | |
| Sponsors | | | | | | | |
| Entry Fees | | Weekend Rate | 2 nd Class Per Day | 3 rd Class Per Da | y Single Da | ay Fee Late Fee | |
| All Classes Sportsman Outboard/Jr. Hydro | | \$250 | \$100 | \$80 | \$125 | \$50 per class | |
| • | ard/Jr. Hydro | 5 \$160/\$100 | \$50 | \$30 | \$80/50 | \$50 per class | |
| SCSC Use Only: Fees collected: En | ntry fee (s) | | Membership | M | isc: | | |

Credit Card Auth#

Method of payment: Cash Check #____