



# SCSC 2024 ENTRY FORM

Event Name: \_\_\_\_\_

Owner Name \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-mail Address (Very Important) \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Life Jacket Mfg. \_\_\_\_\_ Capsule Jacket  Other  Helmet Mfg. \_\_\_\_\_ Open Face  Full Face

Driver Name (If different from Owner) \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-mail Address (Very Important) \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Life Jacket Mfg. \_\_\_\_\_ Capsule Jacket  Other  Helmet Mfg. \_\_\_\_\_ Open Face  Full Face

Co-Driver/Rider Name \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-mail Address (Very Important) \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Life Jacket Mfg. \_\_\_\_\_ Capsule Jacket  Other  Helmet Mfg. \_\_\_\_\_ Open Face  Full Face

### Must Read:

- Entry forms must be received at the SCSC Office prior to the event to be considered pre-registered. Please see event race circular for pre-registration deadline and event fees. Entry forms can be received by e-mail [jodytepper@gmail.com](mailto:jodytepper@gmail.com) or mail C/O Jody Tepper, 11836 W. Ginger Creek Dr., Boise, ID 83713. **Fees can be paid at the race site** by Cash, Check (made payable to SCSC) or Credit Card (credit cards will be charged a 4% convenience fee).
- Drivers must read & sign release waiver at check-in/registration. The release waiver can be found online at [www.scscracing.com](http://www.scscracing.com) if you would like to read prior to coming to the race course.
- All participants must show proof of health insurance at time of registration.

Class	Boat #	Boat Name	Hull Mfg.	Motor Mfg.	C.I. Displacement

Sponsors \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### SCSC Use Only:

Fees collected: Entry fee (s) \_\_\_\_\_ Membership \_\_\_\_\_ Misc: \_\_\_\_\_

Method of payment:  Cash  Check # \_\_\_\_\_  Credit Card Auth# \_\_\_\_\_