

# NEDiv SCCA ClubRally CHAMPIONSHIP

Car # \_\_\_\_\_

Seed \_\_\_\_\_

Class \_\_\_\_\_

**Event:** Sawmill ClubRally  
**Event Type:** Coefficient 2 ClubRally  
**Location:** Morris, PA  
**Region:** Blue Mountain  
**Fees:** \$275  
**Checks Payable to:** Blue Mountain Region, SCCA

**Dates:** May 11, 2001  
**Mail Fees to:** Tom Hovind  
4505 N. Sunset Drive  
Coopersburg, PA 18036  
(610) 967-2767 Evenings  
[tom@hovind.com](mailto:tom@hovind.com)

**ENTRY NOT COMPLETE UNLESS ALL INFORMATION IS PROVIDED**

## VEHICLE INFORMATION - PLEASE PRINT

Car# \_\_\_\_\_ Class \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_

Model \_\_\_\_\_

Engine Displacement \_\_\_\_\_

Color Scheme \_\_\_\_\_

Vehicle Lic. No. \_\_\_\_\_ State \_\_\_\_\_

Registration Expiration Date \_\_\_\_\_

Sponsors \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use additional sheets as necessary)

## DRIVER INFORMATION - PLEASE PRINT

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

E-mail \_\_\_\_\_

In case of emergency notify \_\_\_\_\_

@ ( \_\_\_\_\_ ) \_\_\_\_\_ Circle if person is at the event

State Drivers Lic. \_\_\_\_\_

State of \_\_\_\_\_ Expiration Date \_\_\_\_\_

SCCA Membership No. \_\_\_\_\_

Region \_\_\_\_\_

Competition License No. \_\_\_\_\_

Expiration Date \_\_\_\_\_ Seed \_\_\_\_\_

## INSURANCE INFORMATION - PLEASE PRINT

Insurance Co. \_\_\_\_\_

Policy No. \_\_\_\_\_

Expiration Date \_\_\_\_\_

I warrant the competition vehicle has current minimum insurance coverage of \$100,000/\$200,000/\$50,000 which meets or exceeds the vehicle insurance standards established and required by the SCCA.

**Signature of Vehicle Owner:**

\_\_\_\_\_

**Printed Name:**

\_\_\_\_\_

## CO-DRIVER INFORMATION - PLEASE PRINT

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Email \_\_\_\_\_

In case of emergency notify \_\_\_\_\_

@ ( \_\_\_\_\_ ) \_\_\_\_\_ Circle if person is at the event

State Drivers Lic. \_\_\_\_\_

State of \_\_\_\_\_ Expiration Date \_\_\_\_\_

SCCA Membership No. \_\_\_\_\_

Region \_\_\_\_\_

Competition License No. \_\_\_\_\_

Expiration Date \_\_\_\_\_