



# SCCA Chicago Region Kettle Moraine Double Divisional Races at Road America

August 27-28, 2022

Sanctions 22-R-57230



	STANDARD	SRF / SRF3 / FE / FE2
Both Days	<input type="checkbox"/> \$570	<input type="checkbox"/> \$600
Saturday Only	<input type="checkbox"/> \$450	<input type="checkbox"/> \$480
Sunday Only	<input type="checkbox"/> \$450	<input type="checkbox"/> \$480

☐ Add \$160 for same driver in a second class for **one** regional. Additional compliance fees may apply.

☐ Add \$320 for same driver in a second class **both** regionals. Additional compliance fees may apply.

MAIL TO: Kathey Beimele  
2616 Luedke CT  
Sheboygan WI 53083-4416  
(920)-377-1926

E-Mail regkatscca@gmail.com

Add \$50 late fee if submitted after August 24

Online registration CLOSING August 24

Registration [www.motorsportreg.com](http://www.motorsportreg.com)

This event will be held under the current SCCA General Competition Rules and amendments except as modified by the Supplementary

Regulations for this racing event. A separate entry form must be filled out for each car, driver and race entered.

**PLEASE PRINT CLEARLY IN BLACK INK ONLY!**

## DRIVER INFO

I hereby agree that the car and driver, as described below, are to appear at this Race Meet to compete under the current General Competition Rules and amendments of the Sports Car Club of America, INC. and the Supplementary Regulations of this event.

I affirm that the car entered complies with all requirements for the class and category in which it is entered and that all the information provided on this entry form is valid on this date.

DRIVER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NAME (PRINT LEGIBLY) \_\_\_\_\_ Date of birth \_\_\_\_\_

ADDRESS (STREET) \_\_\_\_\_ (CITY) \_\_\_\_\_ (ST) \_\_\_\_\_ (ZIP) \_\_\_\_\_

REGION OF RECORD \_\_\_\_\_ MEMB # \_\_\_\_\_ EXP DATE \_\_\_\_\_

E-MAIL \_\_\_\_\_ WE WILL USE E-MAIL WHENEVER POSSIBLE

PHONE HOME ( ) \_\_\_\_\_ WORK( ) \_\_\_\_\_ FAX( ) \_\_\_\_\_

**ENTRANT** Only if different from driver. Must be an SCCA member not a corporation.

Name \_\_\_\_\_ Signature \_\_\_\_\_ Memb # \_\_\_\_\_

ADDRESS (STREET) \_\_\_\_\_ (CITY) \_\_\_\_\_ (ST) \_\_\_\_\_ (ZIP) \_\_\_\_\_

## CAR INFO

TRANSPONDER # \_\_\_\_\_ MUST HAVE THIS # (CAN WE READ IT?) \_\_\_\_\_

CAR MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ CLASS \_\_\_\_\_

NUMBER CHOICES \_\_\_\_\_ FIRST \_\_\_\_\_ SECOND \_\_\_\_\_ THIRD (PLEASE GIVE 3 CHOICES)

SPONSOR - 30 SPACES INCLUDING PUNCTUATION \_\_\_\_\_

## CREW (ONLY THE DRIVER OR ENTRANT MAY CHANGE CREW LIST)

1. FREE	_____	4. PAY	_____	\$10
2. FREE	_____	5. PAY	_____	\$10
3. FREE	_____	6. PAY	_____	\$10

## EMERGENCY CONTACT INFO

Primary Contact \_\_\_\_\_ At track? Y / N

Phone # \_\_\_\_\_ Alt Phone \_\_\_\_\_

Secondary Contact \_\_\_\_\_ At track? Y / N

Phone # \_\_\_\_\_ Alt Phone \_\_\_\_\_

## PAYMENT INFO

OPTIONAL WORKER FUND CONTRIBUTION \_\_\_\$10 \_\_\_\$15 \_\_\_\$20 \_\_\_\$25 \_\_\_ OTHER \$ \_\_\_\_\_

Race Fee  Optional Worker Fund Contribution  Late Fee  TOTAL \$

(MAKE CHECK PAYABLE TO CHICAGO REGION SCCA)

CHECK NO. \_\_\_\_\_

5/4/2022