

**SCCA CHICAGO REGION-AUTOBAHN FALL CLASSIC DOUBLE DIVISIONAL**

at Autobahn Country Club-South Course

September 19-20, 2020

Sanction #'s 20-R-8289

MAIL TO: Sue Green  
19010 Round Grove Road  
Morrison, IL 61270  
swgreen321@gmail.com  
(815)718-4881Both Days  STANDARD \$495

SRF/SRF3 /FE/FE2

Saturday only  \$340 \$525Sunday only  \$340 \$370 \$370Add \$50 late fee if submitted after September 17  
Online registration CLOSSES September 18 Add \$310 2nd class same driver both daysRegistration: <http://msreg.com/FallSprints2020> Add \$155 2nd class same driver single day (Saturday or Sunday)

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. \_\_\_\_\_