

SCHEDULE OF ENTRY FEES

Early Entry Fee*:	\$ 395.00
Regular Entry Fee*:	\$ 445.00
One Day Entry Early	\$ 295.00
One Day Entry Regular	\$ 345.00

Double Dipper 2 Day* Early	\$ 200.00
Double Dipper 2 Day* Regular	\$ 250.00
Double Dipper 1 Day Early	\$ 150.00
Double Dipper 1 Day Regular	\$ 200.00
FE & SRF Compliance Fee - per weekend	\$ 30.00

Voluntary Contribution to
Workers' Fund _____

Total Enclosed _____

* See Supplemental Regs for Details

NEW ENGLAND REGION, SCCA

**Bob Introne Memorial Regional
NERRC #2 /NYSRRC
NERRC Championship Triple Reg'I Races
presented by Thompson Speedway
Motorsports Park,
NYSRRC Race Series
Sanction #22-R-57203**

At New Hampshire Motor Speedway

May 13-15, 2022

MAKE CHECKS PAYABLE TO:
New England Region, SCCA
US Funds only

MAIL: Linda Capullo
20 Cottonwood Rd
Norwich, CT 06360

lincap07@gmail.com

860.887.0222

Please - no phone calls after
8:00PM

Express Mail must be

"NO Signature Required"

Except as modified by the enclosed Supplementary Regulations, this event is held under the SCCA General Competition Rules.

Make	Model	Color	Class	Transponder #	Number Request: choose 3
					/ /

Driver		SCCA Membership #	
Email		Phone	
Comp License #	Grade	Exp date	Region
Address (City/State/Zip)			
Entrant name/address		SCCA Membership #	
Sponsor (30 Char. Max.)			

Emergency Contact: Name	Phone	At Track? YES / NO
Address	Relationship	

Crew Members: (3 free, add'l crew \$25 ea.)	Release #	Release #
1 _____	<input type="text"/>	<input type="text"/>
2 _____	<input type="text"/>	<input type="text"/>
3 _____	<input type="text"/>	<input type="text"/>

MINOR

PARTICIPANTS _____

I agree to enter this event which is held under the current General Competition Rules of the Sports Car Club of America, as amended by Fastrack and the Supplementary Regulations pertaining to this event. I further confirm that the car which I have entered complies with all requirements as specified in the GCR for the class, category and race in which it is entered above.

Signature Driver _____

Date _____

Signature Entrant _____

Date _____

OFFICIAL USE ONLY

Group #

Car #

Class

Fee Paid

Money Rec'd @ Track

Release #

TIMING AND SCORING INFORMATION - MUST BE COMPLETED BY DRIVER on late entry only

MAKE/MODEL/YEAR		TRANSPONDER #
COLOR	CLASS	REGION OF RECORD
DRIVER NAME		SCCA MEMBERSHIP #
ADDRESS (STREET/CITY/STATE/ZIP)		

Group #

Car #

Class