

SCHEDULE OF ENTRY FEES

Early Entry Fee \$ 350.00
 Regular Entry Fee*: \$ 400.00

NEW ENGLAND REGION, SCCA

MAKE CHECKS PAYABLE TO:

New England Region, SCCA
 US Funds only

Opening Weekend
SCDA1.com Club Racing Experience (CRE)
24-CRE-62108

MAIL: Linda Capullo
 20 Cottonwood Rd
 Norwich, CT 06360

lincap07@gmail.com

860.887.0222
 Please - no calls after 8 pm thank you

\$ _____
 Voluntary Contribution to
 Workers' Fund _____
 Total Enclosed _____

Palmer Motorsports Park
58 West Ware Rd, Palmer, MA

* See Supplemental Regs for Details

Express Mail must be

"NO Signature Required"

10-12 May 2024

Except as modified by the enclosed Supplemental Regulations, this event is held under the SCCA Club Racing Experience rules.

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

Driver		SCCA Member? Yes / No (circle one)	
Email		SCCA Member #(if yes):	
Comp License # (if applicable)	Grade	Exp date	Region
Address (City/State/Zip)			

OFFICIAL USE ONLY
Group #
Car #
Class
Fee Paid
Money Rec'd @ Track
Release #

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

Crew Members: (3 free, add'l crew \$10 ea.)	Release #	Release #
1 _____	<input type="checkbox"/>	<input type="checkbox"/>
2 _____	<input type="checkbox"/>	<input type="checkbox"/>
3 _____	<input type="checkbox"/>	<input type="checkbox"/>

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 CRE Rules for the class, category and race in which it is entered above.

Signature Driver _____ Date _____

TIMING AND SCORING INFORMATION - MUST BE COMPLETED BY DRIVER on late entry only				Group #
MAKE/MODEL/YEAR	CLASS		TRANSPONDER #	Car #
COLOR	REGION OF RECORD		SCCA MEMBERSHIP #	
DRIVER NAME				Class
ADDRESS (STREET/CITY/STATE/ZIP)				