

SCHEDULE OF ENTRY FEES

Early Entry Fee*	\$ 350.00
Regular Entry Fee*	\$ 400.00
Double Dipper 1 Day Early	\$ 175.00
Double Dipper 1 Day Regular	\$ 225.00

NEW ENGLAND REGION, SCCA

Midnight Madness - NERRC #3

Including

NERRC Championship Races presented by

Thompson Speedway Motorsports Park &

Historic Racing Group Series

MAKE CHECKS PAYABLE TO:

New England Region, SCCA
US Funds only

MAIL: Linda Capullo
20 Cottonwood Rd
Norwich, CT 06360

FE,FE2, SRF3 & SRF Compliance
Fee - per weekend \$ 30.00

Voluntary Contribution to
Workers' Fund _____
Total Enclosed _____

Sanction #24-R-61849 24-VINT-63370

Thompson Speedway Motorsports Park

205 East Thompson Road

Thompson, CT 06277

July 5-7, 2024

email: lincap07@gmail.com
860.887.0222
Please - no phone calls after
8:00PM

Express Mail must be
"NO Signature Required"

* See Supplemental Regs for Details

Except as modified by the enclosed Supplemental 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.)			


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

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

Crew Members: (3 free, add'l crew \$10 ea.)		Release #	Release #
1 _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____

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.

Release #


Signature Driver _____ Date _____ Signature Entrant _____ Date _____

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 _____