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

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

Voluntary Contribution to Workers' Fund _____

Total Enclosed _____

* See Supplemental Regs for Details

NEW ENGLAND REGION, SCCA

Midnight Madness - NERRC #5

Including

NERRC Championship Races presented by

Thompson Speedway Motorsports Park &

Historic Racing Group Series

Sanction #26-R-66154, 26-VINT-66155

Thompson Speedway Motorsports Park
205 East Thompson Road
Thompson, CT 06277

August 14 - 16, 2026

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

MAIL: Linda Capullo
20 Cottonwood Rd
Norwich, CT 06360

email: 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 Supplemental Regulations, this event is held under the SCCA General Competition Rules as amended by Fastrack.

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, addt'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.

Signature Driver _____ Date _____ Signature Entrant _____ Date _____

Release #

OFFICIAL USE ONLY

Group #

Car #

Class

Fee Paid

Money Rec'd @ Track

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