



**Cal Club Racing
Club Race/Time Trial
Sept 1-2, 2018
Buttonwillow Raceway**



Event: Club Race/ Time Trial	Date: Sept. 1-2,2018		Sanction #:	Track / Location: Buttonwillow Raceway 14 Counter Clockwise
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Log Book ID	Make	Model	Year	Color	Class	Car Number Choices		
						1 st	2 nd	3 rd

Transponder # - Required				E-mail		Registrar Use Only
Driver's Name (Please print legibly)				Daytime Phone		
Address				Evening		Car #
City		State	Zip Code		Fax	Class
Membership Number			Expiration Date			Member/License
Region of Record	Cal Club Associate or Lifetime Member? Yes No		If Renting, From Whom?			Tech Card Given?

Entrant (if different than driver) Name Address City, State, Zip			Entrant Member # AND Expiration Date		Waiver Signed?
Sponsor(s)					Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Check # <input type="checkbox"/> Credit Card Total Paid \$ _____

In Emergency, notify?		Phone	At Track? Yes No	\$ _____ Registrar Initials
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It is agreed that the entry, if accepted, shall be a contract between the Driver/Entrant & the SCCA/California Sports Car Club Region under which the above car & driver will take part in the competition described, unless prevented by force beyond control of the Driver/Entrant. This event will be conducted under the SCCA 2018 General Competition Rules & California Sports Car Club 2018 Supplementary Regulations and the Entrant & Driver agree to abide by these rules. All participants must sign a release agreement at Registration before entering the track facility.

DRIVER SIGNATURE _____ ENTRANT SIGNATURE _____

FEES:	Entry Fees:	SRF/FE Compliance Fee		Total Fees:	PLEASE SEND ENTRY TO:
1 Day Race Entry	\$295	\$10 Single		\$ _____	Cal Club Registrar 4743 Canehill Ave. Lakewood, CA 90713 Phone: 661.304-9382 Fax: 800-448-9201 E-Mail: calclubhq@calclub.com
1 Day Race Entry 2 Classes	\$395			\$ _____	
2 Day Race Entry	\$395	\$20 Double		\$ _____	
2 Day Race Entry 2 Classes	\$590			\$ _____	
Time Trial - 1 Day	\$125			\$ _____	
Time Trial - 2 Day	\$200			\$ _____	
		Worker Donation		\$ _____	
		TOTAL		\$ _____	