# Membership Application

To apply for membership in the Sports Car Club of America, the world's largest motorsports enthusiast automotive organization, please complete the form below and return with payment, to the SCCA Membership Department, PO Box 299,Topeka, KS 66601-0299, or to the South Bend Region, SCCA Membership Chair: Brandon Irwin 422 Studebaker St, Mishawaka IN 46544-6267.
E-Mail: <birdman002@gmail.com> Make checks payable to SCCA.

**PLEASE PRINT OR TYPE**

Name_____ Birth Date _____ / _____ / _____
Month Day Year

Address_____ Telephone (_____ )_____
City _____ State_____ Zip _____

E-Mail:_____

The following only needed for family memberships:

Spouse Name_____ Birth Date _____ / _____ / _____
Child Name _____ Birth Date _____/ _____ / _____

Child Name _____ Birth Date _____/ _____ / _____

**PRIMARY INTEREST(S) IN SCCA:**
Please indicate the area of SCCA in which you plan to participate, or which interests you most.
(Please check only one box.)
O Club Racing O Time Trails/PDX O Rally O Rally Cross O Solo O Vintage O Pro Racing

| Membership Dues | National | + Regional | = Cost | 2 Years | 3 Years | Total |
|---|---|---|---|---|---|---|
| O Individual Member | $65.00 | $15.00 | $80.00 | $140.00 | $200.00 | $ _____ |
| O Family Membership | 80.00 | 20.00 | 100.00 | 180.00 | 245.00 | $ _____ |
| O First Gear Member (24 years or under) | 30.00 | 15.00 | 45.00 | 75.00 | 95.00 | $ _____ |
| Discount for prior Weekend Membership #1 | | | | Deduct | $—15.00 | $ _____ |
| Discount for prior Weekend Membership #2 | | | | Deduct | $—15.00 | $ _____ |
| Referred by SCCA Member: Brandon Irwin (First and Last Name) | # 482933 (Member Number Required) | | | Deduct | $—15.00 | $ _____ |
| | | | | | **Grand Total** | **$ _____** |

O Enclosed is my check or money order. **Make payable to SCCA**. ***DO NOT SEND CASH***

O Visa/MasterCard/Discover Credit Card No _____ Expiration Date_____
O **Auto-Renew with Credit Card** (Credit card shown above will automatically be charged National & Regional dues prior to membership expiration date.)

By accepting membership in the SCCA and its **South Bend Region #35,** I agree to conduct myself according to the highest standards of behavior and sportmanship in a manner that shall not be prejudicial to the reputation of the Club or fellow members.

**Applicant's Signature**_____Date
Signature and date both required _____

Dues Include payment for subscription to SportsCar magazine ($24 value.) Dues are not deductible as charitable contributions.
**Applications submitted by fax or e-mail must be accompanied by a Visa or MasterCard account number for payment.**

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