

This event will be held under the 2007 SCCA General Competition Rules and amendments, except as modified by the Supplementary Regulations for this racing event.

South Bend Region Presents

# THE Bert Olson National



**SCCA**  
Sports Car Club of America

August 25 and 26, 2007



South Haven, MI



Sports Car Club of America

## Race Groups

|   |                                     |
|---|-------------------------------------|
| 1 | SM, T2, T3, SSB, SSC                |
| 2 | CSR, DSR, S2000, FA, FB, FC, FE, FM |
| 3 | GT1, GT2, GT3, AS, T1, BP, ST       |
| 4 | DP, EP, FP, GP, HP, GTL             |
| 5 | FV, F500, FF                        |
| 6 | SRF                                 |

**Please remember:** SCCA races are staffed by volunteers. Any help your race team can provide, even for a session or two, will be appreciated. Please consider helping out in Timing and Scoring or one of the other specialties.

## SCHEDULE

### Friday, August 24, 2007 (all times EDT)

5:00 PM - 9:00 PM Registration  
5:30 PM - 9:30 PM Tech Inspection

### Saturday, August 25, 2007

6:30 AM - 1:00 PM Registration  
7:00 AM - 1:00 PM Tech Inspection  
7:00 AM - 11:00 AM Scales Available  
8:00 AM 25 Minute Qualifying  
Sessions for Groups 1 - 6  
11:00 AM 30 Minute Final Qualifying  
Session for Group 1

Lunch

1:00 PM 30 Minute Final Qualifying  
Sessions for Groups 2 - 6

4:15 PM 24 Lap National Race - Group 1

**Worker and Driver party following last checkered flag,  
Sponsored by South Bend Region**

### Sunday, August 26, 2007

6:45 - 11:00 AM Registration  
7:00 - 11:00 AM Tech Inspection  
7:30 - 8:30 AM Scales Available  
8:00 AM 7 Minute emergency warmup  
Groups 2, 5, 6  
8:10 AM 7 minute emergency warmup  
Groups 3, 4  
8:30 AM 24 Lap National Race - Group 2  
Followed by Group 3  
10:00 AM-Noon **Mandatory QUIET TIME**  
12:00 PM 24 Lap National Race - Group 4  
Followed by Group 5 and Group 6

## RACE OFFICIALS

Race Chair ..... Paul McBride  
574-289-1398  
Assistant Race Chair ..... Duane Belisle  
Chief Registrar ..... Kendra Green  
8757 Woodwren Dr.  
West Olive, MI 49460  
616-875-8992  
616-875-2708 fax  
Entry Chief ..... William Loring  
Chief Steward ..... Steve Harris  
937-438-3005 day  
937-681-4484 cell  
Asst. Operating ..... Bill Farr, Frank Karl,  
John Peterson, Andy Welden  
Asst. Safety ..... Bill Shuberth  
Chairman SOM ..... Ann Burke  
Steward of Meet ..... Jeff Jankiewicz  
Chief Scrutineer ..... Rod Markowicz  
Chief Course ..... Wayne Rogers  
Chief Timing/Scoring ..... Lorrie Wandell  
Chief Grid ..... Lynnette Markowicz  
Chief Paddock ..... Tom Smolinski  
Chief Pit ..... Duane Belisle  
Chief Starter ..... Bobbe Orr  
Chief Flags ..... Verne Wandell  
Chief of Communications ..... Jim Desenberg  
Chief Sound ..... Eugene Wiczorek  
Chief Medical ..... TBA  
Regional Executive ..... Jeff Luckritz  
Pace Car Driver ..... Duane Bailey  
Announcer ..... Lloyd Loring

## SUPPLEMENTARY REGULATIONS

1. The South Bend Region - SCCA will present the **'Bert Olson National'** at GingerMan Raceway, South Haven, Michigan on August 25-26, 2007. The twenty-four (24) lap National Races will be conducted in accordance with the 2007 SCCA General Competition Rules including any additions or corrections as printed in FasTrack.
  2. All SCCA recognized national classes will be allowed. Only National Competition License holders will be allowed to compete.
  3. Trophies will be awarded based on GCR minimum requirements. No trophies will be mailed.
  4. Scales will be available ½ hour after registration opens each day.
  5. The operation of 2-way radios on the following frequencies will NOT be permitted: 151.625, 151.925, 154.600.
  6. The use of three or four wheel mini-vehicles is permitted only as support vehicles. The support vehicle must display car number and class and be driven by persons holding a valid state driver's license. Slow speeds only. Riding on the coachwork or outside any vehicle is NOT PERMITTED on track property.
  7. Drivers receiving a Black Flag will enter pit lane and proceed to the Black Flag station in front of the tower.
  8. Sound Control will be located between turns 2 and 3.
  9. Transponders are required on all race vehicles.
  10. THE FIRST THREE FINISHERS IN EACH CLASS WILL BE IMPOUNDED AFTER THEIR RACE. Additional race vehicles may be impounded after any on track sessions at the discretion of the Chief Steward. IT IS THE RESPONSIBILITY OF THE COMPETITOR TO REPORT TO IMPOUND AT THE BASE OF THE TOWER. Impound will be reached by way of the road at the North end of pit lane. A maximum of two people, including the driver, will be permitted in the impound area and the driver MUST remain with the vehicle until it is released by the Chief Scrutineer or his designated representative.
  11. Qualifying grid, final grid, provisional race results, official race results and sound levels will be posted at the Driver Information Board.
  12. Only SCCA member crew will be allowed in the hot pits. Only one may cross the pit lane for signaling purposes. There will be no smoking in the hot pits. Appropriate attire must be worn.
  13. The ENTRY FEE for this event is \$245.00. SRF, FSCCA, and SRSCCA should include an additional \$10.00 for compliance fees. The entry deadline is August 22nd. A \$30.00 collection fee will be charged to entrants for returned checks for any reason. The entry fee includes driver and three crew members. Additional crew and guest passes may be purchased for \$10.00. The entry fee also includes a Saturday evening dinner pass for the driver. Additional dinner passes may be purchased for \$5.00 each.
- All entries should be mailed to:
- Kendra Green - Registrar  
8757 Woodwren Drive  
West Olive, MI 49460-8830  
616-875-8992 home  
616-875-2708 fax  
kgreen\_registrar@yahoo.com
- Make checks payable to South Bend Region - SCCA (SBR - SCCA). All cancellations should be in writing and received by Wednesday, August 22, 2007.
14. TRACK RULES - Camping Pass is \$5.00 per person per night. Children under 12 are free. Pets must be on leashes at all times and owners are responsible for any associated clean-up. No pets are allowed in the Park area around the pond and the pavilion. Sale of products or services on track property is strictly prohibited without track management approval. The track property must be left clean. Waste oil must be placed in the red barrels provided. No tires should be left on track property. The maximum speed limit in all areas except the race course is 10 MPH. The track will close at 8:00 pm on Sunday, August 26, 2007. Arrangements must be made with track management if items are to be left until a later time. Track gas will be for sale. There will be air and water available. Race engines shall not be started or run between the hours of 6:30 pm and 8:00 am each day and between 10:00 am and 12:00 noon on Sunday.
  15. Contact track for test day information. This is NOT sanctioned by SCCA or South Bend Region

South Bend Region Presents  
**THE Bert Olson  
 National**



Sanction Numbers:  
**07-N-72-P**

Held under the SCCA  
 General Competition Rules

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | National Race<br>\$245.00                   |
| <input type="checkbox"/> | Compliance Fee - SRF, FSCCA, SRSCCA<br>\$10 |
| <input type="checkbox"/> | Late Fee has been waived!                   |
| _____                    | Crew Dinners - \$5 Each                     |
| _____                    | Worker Donation                             |
| <b>Total Enclosed</b>    |   |

**OFFICIAL ENTRY FORM**

Make check/money order payable to:  
 SOUTH BEND REGION, SCCA



**August 25 and 26, 2007**

Mail To:

**Kendra Green**  
 8757 Woodwren Dr.  
 West Olive, MI 49460  
 616-875-8992  
 616-875-2708 fax  
 kgreen\_registrar@yahoo.com

| Make   | Model     | Color         | Class                   | Car No. Desired  |             |     |
|--|-----------|---------------|-------------------------|------------------|-------------|-----|
|  |           |               |                         | GLDIV            | 1st         | 2nd |
| Driver's Name  |           |               |                         | Phone            |             |     |
| Address  |           |               |                         |                  |             |     |
| City   |           | State         |                         | Zip              |             |     |
| E-mail Address   |           |               |                         |                  |             |     |
| Member/License No.   |           | License Grade |                         | Region of Record |             |     |
| In Emergency Notify  |           |               |                         | Phone            |             |     |
| Address  |           |               |                         |                  | At Track?   |     |
| Entrant's Name   |           |               | Entrant's Member Number |                  |             |     |
| Entrant's Address  |           |               |                         |                  |             |     |
| Sponsor  |           |               |                         |                  |             |     |
| Crew Members   | 1. (Free) |               | 4. (\$10)               |                  |             |     |
|  | 2. (Free) |               | 5. (\$10)               |                  |             |     |
|  | 3. (Free) |               | 6. (\$10)               |                  |             |     |
| <p>I hereby agree that the car and driver, as described above, will appear at this event to participate under the current General Competition Rules &amp; Amendments of the Sports Car Club of America, Inc. &amp; Supplementary Regulations of this event. The car entered complies with all requirements for the class and category in which it is entered and that all of the information provided is valid and accurate.</p> |           |               |                         |                  |             |     |
| Entrant/Owner<br>(If other than driver) _____  |           |               | Driver _____            |                  |             |     |
| (signature)  |           |               | (date)                  |                  | (signature) |     |
|  |           |               | (date)                  |                  |             |     |

| Official  |
|-----------|
| Entry No. |
| Race      |
| Car No.   |
| Class     |
| Postmark  |
| Fee Rec'd |
| Check #   |

| DRIVER MEDICAL INFORMATION - DRIVER MUST COMPLETE |             |          |            |                           |            |            |
|---|-------------|----------|------------|---------------------------|------------|------------|
| Driver's Name                                     |             |          |            |                           | Age        |            |
| In Emergency Notify                               |             |          |            | Phone                     |            |            |
| Address   |             |          |            |                           | At Track?  |            |
| Current Medications                               |             |          |            | Drug Allergies            |            |            |
| List any special conditions                       |             |          |            |                           | Blood Type |            |
| Describe any illness/injury in past 12 mos.       |             |          |            |                           |            |            |
| Personal Physician                                |             |          | City/State |                           | Phone      |            |
| Answer YES or NO                                  |             | Contacts | Dentures   | Asthmatic                 | Epileptic  | Hemophilic |
| Diabetic  | Organ Donor |          | Where      |                           |            |            |
| Religious Preference                              |             |          |            | Date of Last Tetanus Shot |            |            |

| Official |
|----------|
| Race     |
| Car No.  |
| Class    |

| TIMING AND SCORING INFORMATION - DRIVER MUST COMPLETE |  |                  |            |
|---|--|------------------|------------|
| Car Make/Model  |  | Color            | Year if SS |
| Driver's Name   |  | Member No.       |            |
| Address   |  | Region of Record |            |
| City, State, Zip                                      |  | Transponder No.  |            |
| Sponsor   |  | Class            |            |

| Official |
|----------|
| Car No.  |
| Race     |