

Trial and Error Time!

TEST & TUNE

(not a points event but counts as an event to determine championship eligibility)

Saturday May 14, 2005

**At the Tire Rack Test Track,
7101 Vorden Parkway, South Bend, IN**

(see map below)



Registration 8:30-9:30 AM **EST** (Indiana time) First car off approx 11:00 AM.

Preregister: \$22 SCCA members, \$27 non-SCCA members (via mail or myautoevents.com)

On site registration: \$25 SCCA members, \$30 non-SCCA members

A \$10 late fee for registration after 9:30 AM EST

Get a fast start on the 2005 season!

You'll need a safe car, seat belts, an effective muffler, an approved helmet (Snell 1990 or newer). Some loaner helmets will be available.

This event will give you many runs, time to work on your car, and an opportunity to try different things without worrying about a trophy (none offered!)

Passengers permitted for training or testing purposes (must have signed the waiver and meet entry rules.)

You will be required to work to participate.

Cars in all SCCA car classes are eligible.

All SCCA safety rules in force.

If you plan to run a KART, you must notify Kim Bollinger beforehand.

If you are a minor (under 18) and wish to run, Call Kent Crussemeyer in advance **(574) 534-0079** for details on the minor waiver needed.

If you do not call, we may have to deny entry.

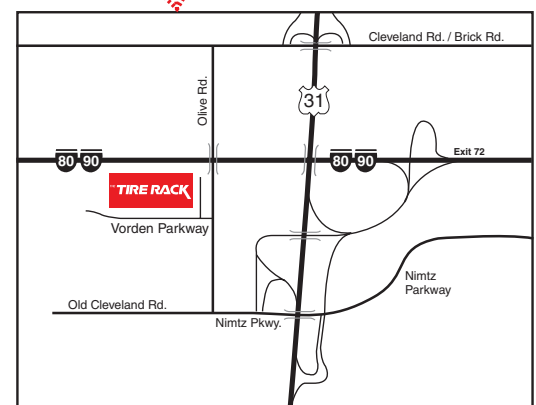
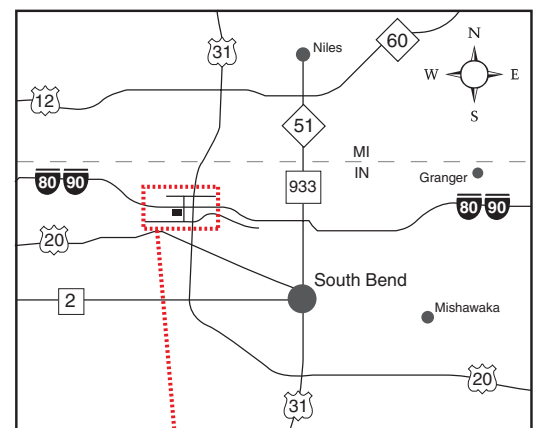
Further information from:

Kim Bollinger (574) 271-0088

E-mail: solo@sbrscca.org

or visit our SBR Web Site at < <http://sbrscca.org> >

Pre-Register at:< <http://www.myautoevents.com/> >



THE **TIRE RACK**[®]
MOTORSPORTS



SBR SOLO CHAMPIONSHIP SERIES Event Entry Form

Event Name _____ Region South Bend Date _____

DRIVER INFORMATION

Name _____ Age _____ Sex _____ (M/F)

Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____ Work Phone (_____) _____

Driver's License No. _____ State _____ Exp. Date _____

SCCA Region _____ SCCA Membership No. _____

In case of emergency notify: _____ Phone (_____) _____

ENTRY/CAR INFORMATION

Check if entry is Ladies Class Novice Class

Solo Car Class _____ Car Number Preferred: 1st _____ 2nd _____ 3rd _____

Make _____ Model _____ Year _____ Color _____

Tire Brand _____ Tire Size _____ Engine _____

Owner _____ Sponsor _____

If 2-driver car who is other driver? _____ (Must have separate entry blank)

WORK PREFERENCE

- Tech
- Timing & Scoring
- Safety Steward
- Course Control
- Other _____

PAYMENT **Make checks to: SBR-SCCA**

Send this form and payment to:
 South Bend Region, SCCA
 William Loring, Online Registrar
 11537 Austin Street
 Osceola, IN 46561-9109
 (574) 675-0641

Entry fee enclosed : \$ _____
 SCCA Member \$22.00
 Guest \$27.00
 TOTAL ENCLOSED \$ _____

FOR OFFICE USE ONLY	Class	Number	Date Rec'd	Notified

Use one entry blank per driver. This form may be duplicated.