

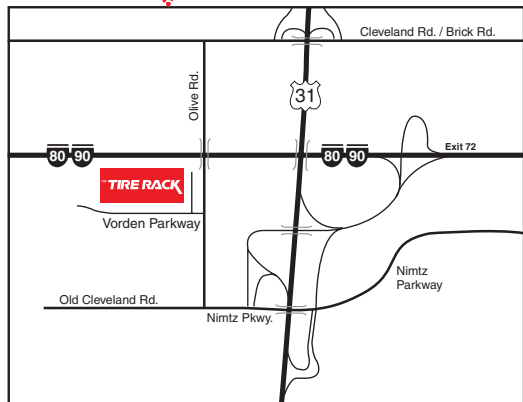
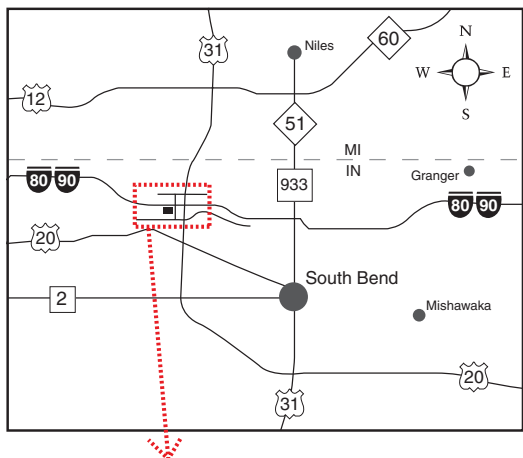
Presenting the 7th SBR Points Solo

Look Further Ahead!

Sunday September 10, 2006

At the Tire Rack Test Track
7101 Vorden Parkway, South Bend, IN
(see map below)

THE **TIRE RACK**[®]
www.tirerack.com



Registration 8:30-9:30 AM **EDT** 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 EDT

Everyone is welcome!

You'll need a safe car, seat belts, an approved helmet (Snell 1995 or newer). A few loaner helmets will be available.

- Trophies and points for all SCCA car classes for the **2006 SBR Solo II Regional Class Championships**
- Trophies and points for the **Novice Class Championship** (scored on the 2006 PAX/RTP Index.)
- Points will also be earned toward the annual **Tire Rack Championship** available to all drivers who run three or more events in the 2006 series.

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.