



SCCA Competition License Application

Please read instructions carefully on reverse side prior to completing application.
Reminder: Current GCR Required

Office Use Only	
Date Rcvd _____	
\$ Rcvd _____	Chk # _____
M/S Dues \$ _____	License \$ _____
Merchandise \$ _____	
Refund \$ _____	
Misc _____	

Please complete the following:

Change of Address? Yes

Please refer to: GCR 16.3.3., regarding the procedures to **CHANGE YOUR DIVISION**

Membership No: _____ Exp. Date: _____ Region: _____ Division: _____
 Name: _____ Birthdate: _____
 Addr: _____
 City: _____ State: _____ Country: _____ Zip: _____
 Phone: (H) (_____) (W) (_____) E-mail: _____
 Driver's License No. _____ State: _____ Exp. Date: _____

Special Handling Service \$125.00
 This is a 24 hour turnaround process, which includes a copy of your license to be faxed and sent by overnight express mail
 Fax# (_____) _____
 Yes

Check the type of License and Fee you are applying for:

New	Renewal	License Type	Fee
<input type="checkbox"/>	<input type="checkbox"/>	National Competition	\$ 75.00
<input type="checkbox"/>	<input type="checkbox"/>	Regional Competition	\$ 75.00
<input type="checkbox"/>		Novice Permit to National Competition	\$ 100.00
<input type="checkbox"/>		Novice Permit to Regional Competition	\$ 75.00
<input type="checkbox"/>	<input type="checkbox"/>	Vintage Competition	\$ 55.00

Please list any class in which you intend to compete during the following 12 months:

Required Participation (must be completed in order to receive a license)				
List only those events which meet the participation requirements stated in the instructions on the reverse side of this application.				
EVENT DATE	TRACK	SANCTION # (For Vintage, List Sanction Body)	CAR CLASS	FINISHING POSITION
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Method of Payment		
<input type="checkbox"/> Check	<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit Card:
Visa / MasterCard (only)	Acct# _____ Exp. _____	Total Amount Enclosed \$ _____
Applications submitted by fax must be accompanied by a Visa or MasterCard account number for payment		

SEE PHYSICAL EXAMINATION REQUIREMENTS ON REVERSE SIDE

I hereby certify that the information above is correct. I realize any falsification will result in the loss of my SCCA Competition License. Additionally, I agree to abide by the provisions of the SCCA General Competition Rules and/or Pro Racing Rules and Regulations, as well as all applicable event Supplementary Regulations.

TIN / SS# _____ Subject to back up withholding tax US Citizen

Applicant's Signature: _____ Date: _____

Instructions & Requirements

Requirements for ALL Applicants

1. Applicant must hold a current Membership with the SCCA.
2. Application must be completed and fees paid in full.
3. Application must be accompanied by a current SCCA physical exam, when required. (See Physical Exam Requirements below)
4. **MINORS Applicant 16 or 17:** New or Renewing applications **MUST** be accompanied by a completed Parental Consent Release & Waiver of Liability, Assumption of Risk, & Indemnity Agreement, plus the Minor's Assumption of Risk Acknowledgement forms. **These forms must be completed each year before applicants receives his/her license.**

Competition License Terms

All SCCA Competition Licenses indicate the month and year of expiration. This expiration date coincides with the Membership anniversary date. ALL licenses expire on the same date as the Membership anniversary date, and BOTH must be renewed when they expire. Renewal of a Competition License is not automatic with Membership renewal.

New Competition License Participation Requirements

Vintage - Application shall have successfully completed two (2) SCCA Driver Schools or approved equivalent, and (2) SCCA sanctioned Regional events, within the preceding 24 months. Completed original Novice Permit logbook, containing Chief Steward's signature of approval, must be submitted to the Licensing Department with \$55 license fee.

Regional - Applicant shall have successfully completed two (2) SCCA Driver Schools or approved equivalent, and two (2) SCCA sanctioned Regional events, within the preceding 24 months. Completed original Novice Permit logbook, containing Chief Steward's signature of approval, must be submitted to the Licensing Department with \$55 license fee.

National - Applicant shall have successfully completed four (4) SCCA sanctioned Regional events within the preceding 12 months.

Competition License Renewal Participation Requirements

Vintage - Completion of at least two (2) Vintage or SCCA sanctioned Regional events in the preceding 12 months.

Regional - Completion of at least two (2) SCCA sanctioned Regional events in the preceding 12 months.

National - Completion of one of the following within the preceding 12 months:

- a. At least three (3) SCCA sanctioned National or SCCA sanctioned FIA events
- b. Two SCCA sanctioned National or SCCA sanctioned FIA, and one SCCA sanctioned Regional event
- c. One SCCA sanctioned National or SCCA sanctioned FIA event, and three (3) SCCA sanctioned Regional events
- d. Four (4) SCCA sanctioned Regional events

Applicants With Less Than The Minimum Participation Requirements

Applications with less than the minimum participation requirements shall be submitted, along with a letter of explanation and competition resume, to the applicant's Divisional Administrator Licensing Chairman for review. Applicants shall include a stamped envelope addressed to SCCA Central Licensing, P.O. Box 19400, Topeka, KS 66619-0400. **For safe keeping, photo copy all correspondence prior to mailing.**

Physical Examination Requirements

A physical examination is required for each SCCA Competitor applying for a Novice, Vintage, Regional, or National Competition License in the following manner:

every five (5) years for those 16-35 years of age

every two (2) years for those 36-59 years of age

every year for those 60 years of age and older

(Every blank on the physical form MUST be completed)

Physical Examination shall be submitted on the Official SCCA Medical Form obtainable from the SCCA Licensing Department. Exam must be verifiable, therefore completed exam must have a "stamped" doctor's signature and address on the front side of the Medical form. If a "stamp" is not available, print Doctor's name, address and phone number, clearly on the form.

Any known medical conditions which could affect your ability to compete must be immediately reported to the Medical Review Board per GCR 4.7.1.

If you have questions, please contact Customer Service Department BEFORE you send in your application.

SCCA Licensing/Membership - P.O. Box 299, Topeka, KS 66601-0299 - 1-800-770-2055 - 785-232-7213 Fax - www.scca.com