

2016 RALLYSPRINT / RALLYTRIALS SANCTION APPLICATION

SANCTION NUMBER:	(Assigned by National Office)
Supplemental Rules and a video of site/course	nce application and RallySprint Safety Plan, a Tech Form, Event e must be submitted a minimum of 60 days prior to the event for first time days prior to event date. This form is designed to be filled in
1) EVENT DATE(S): Start: Click here to ente	r a date. End: Click here to enter a date.
2) REGION:	
3) TYPE OF EVENT: RALLYSPRINT	□RALLYTRIAL
4) EVENT NAME:	
5) LOCATION/ADDRESS OF EVENT:	
	EVENT OFFICIALS:
Chairman:(Must be current adult SCCA member)	SCCA Member #
Phone: (Best method)	Email:
Event Steward or Safety Steward: (Must be current adult SCCA member with Rally Phone:	SCCA Member # Cross Safety Steward License. May not serve as the course designer.) Email:
(Best method) Spectator Safety Steward: Phone: (Best method)	SCCA Member # Email:
Tech Inspector: Phone: (Best method)	SCCA Member # Email:
Course Designer: (May not be the primary Safety Steward) Phone: (Best method)	SCCA Member # Email:
	CE CERTIFICATE REQUIREMENTS:
Send Original Insurance Certificate to: (certifica Name:	tes will be emailed) Email:
Additional Insureds:	
Name:	Email:
Name:	Email:
Name:	Email:

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EVENT SITE INFORMATION:		
Type of facility (fairgrounds, parking lot, etc):		
Site owner or contact:		
Approximate Size of course area: Course Length: Course surface:		
Attach a drawing of course layout with approximate size, or attach map with road(s) defined. Comments:		
AGREEMENT TO CONDITIONS:		
In requesting a SCCA RallySprint Sanction, the organizer certifies that this event will be organized and conducted in accordance with the RallySpring Rules, Safety Plan and Event Supplemental Regulations.		
Signatures required for submission:		
Event Chairman: Date		
Regional Executive/RE Designee Date SCCA #:		
Submit to: SCCA Rally Department, Attn: Brian Harmer, 6620 SE Dwight St., Topeka, KS 66619 Or Email to: BHarmer@SCCA.com		
FOR USE BY THE SCCA NATIONAL OFFICE:		
Date received by SCCA National Office: Click here to enter a date.		
Date sent to RS/RT Committee members: Click here to enter a date.		
RS/RT Committee Approval: Click here to enter a date.		
Approved by: Date: (RallySprint Committee member)		
Sanction number:		
FOR USE BY THE SCCA NATIONAL OFFICE:		
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The RallyCross Audit Form must be completed and returned to the SCCA Rally Department along with the appropriate sanction fee and insurance fee no later than 14 days after the event.

*Insurance is \$100 minumum per event, regardless of the number of entries.

If a region is in arrears on audit payments by more than 14 days, further sanction applications may not be approved. Over 14 days audits are assessed a \$25 fee. Audits not paid within 30 days of the event may incur an additional fee for the region.

In the event of a cancellation, written notice (email) is required no later than 2 weeks after the originally scheduled event date. If written notice is not received within this time, the host region may be charged for the event

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RallySprint/ RallyTrials Safety Plan

The following information shall be completed as it pertains to the event.

Primary medical support:
Secondary medical support:
Local Hospital(s):
Air transport:
The Facility: (Explain the type of facility and security of course area)
<u>Waivers:</u> (What will the waiver process be for the event and the facility?)
<u>Course Design:</u> (Any special consideration relating to course design, roads?)
<u>Communication Network:</u> (Explain what system will be used during event, who will be in contact, etc)
<u>Course Opening:</u> (Will a course opening vehicle be used? What are the responsibilities?)
<u>Course Closing/Sweep:</u> (Will course closing/sweep vehicle(s) be used? What are the responsibilities?)
<u>Vehicle accountability/tracking:</u> (how will competition cars be tracked or accounted for?)
<u>Spectator Management:</u> (Are there spectator viewing areas? How will spectators be managed?) (Any spectator area should be marked on the course map)
<u>Competition Vehicles and equipment:</u> (Explain safety inspection process for vehicles and personal safety devices required).
Other: (Any other pertinent safety considerations?)

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