2017 SCCA SOLO AUDIT FORM



SANCTION NUMBER:

Solo audit form must be completed & returned to the SCCA Solo Department with the appropriate sanction and insurance fees no later than 14 days after the event. An event is considered completed upon receipt of this audit form with payment.

REGION:	EVENT DATE:
EVENT LOCATION:	EVENT NAME:
EVENT CHAIR:	
EVENT SAFETY STEWARI):
• •	ents requiring the filing of an Incident Report Form? YES NO nt to Risk Management? YES NO Date Sent:
	REGIONAL, DRIFT OR CHARITY EVENT
SANCTION FEE: \$6.50 →	
**CHARITY EVENT - One e	X (Number Drivers Competing) = <u>\$</u> IUM \$130.00/20 DRIVERS (UNLESS CHARITY EVENT) - NO MAXIMUM INSURANCE AMOUNT vent per region, per year. Flat Fee \$80. PROOF OF CHARITY & Number of Participants at Charity Event <u>TOTAL AMOUNT DUE = \$</u>
VISA, MASTERCARD or DISC	OVER ACCEPTED
CARD NUMBER:	EXP. DATE:(3 digit code)
sanction and insurance fe	completed and returned to the SCCA Solo Department along with the appropriate ee NO LATER THAN 14 DAYS AFTER THE SOLO EVENT OR LATE FEES APPLY. 50 per driver, insurance fee is \$6.50 per driver or \$130.00 (minimum of 20 drivers). MINIMUM INSURANCE FEE IS \$120.00/20 DRIVERS
approved. In the event of a	udit payments by more than 30 days, further sanction applications may not be cancellation, written notice is required via fax (785-861-1731) or email ter than 14 days after the originally scheduled event date. If written notice is not e charges may apply.
On behalf of the on this Solo audit form is co	, Region, SCCA, I hereby certify that the information rrect and that we understand the rules & penalties stated here.
Event Organizer	Signature Date
Questions? - Call	Deena Rowland 1-800-770-2055.ext 331~email: drowland@SCCA.com



SCCA SOLO DEPARTMENT, 6620 SE Dwight St, TOPEKA, KS 66601-1833 Phone: 800-770-2055 ~ 785-232-7656 ~ FAX 785-861-1731