

## 2018 SOLO SANCTION APPLICATION

Additional Fee if received less than 14 days before the Event Date: \$25.00.

SANCTION NUMBER (for office use only):

1. REGION	2. EVENT DATE(S)
3. LOCATION/ADDRESS OF EVEN	т.
4. TYPE OF EVENT (check all applice Solo - Sanction Fee, \$6.50; Insura Junior Driver Program (JDP) - **MUST HAVE NATIONAL OFFICE □ Race Track Solo - include writter □ Solo Trials - submit with applicat	cable boxes):
☐ Other:	
5. INSURANCE CERTIFICATE REQUIR	REMENTS(sent by e-mail):
Send Original Insurance Certificate to:	
Name:	
E-mail address:	
Name:	
E-mail address:	
6. ADDITIONAL INSUREDS (to be	named on the insurance certificate):
Name:	Event Relationship:
Name:	Event Relationship:
Name:	Event Relationship:
7. EVENT OFFICIALS (All event offi	icials must be active SCCA members over 18 years of age)
Event Chair:	Member No.:
E-mail address:	
Solo Safety Steward:	Member No
	se for Junior Driver Program?
Chief of Weivers	Mombor No

7. EVENT OFFICIALS (cont	inued)		
-	at this event? As of Feb. 1, 2018, the Youth S		
new JDP training an	d be JDP licensed to host Junior Drivers at thi	s event (JA, JB, and J	C).
Youth Steward JDP:		Member No.	
Completed 2018 JDP	training and received JDP-applicable license?		No
.,			
Kart Course Designer JDP:	training and received JDP-applicable license?		 No
Completed 2016 3DF	training and received 3DF-applicable license:	Lifes L	INO
Kart Tech Inspector JDP:		Member No	
	training and received JDP-applicable license?	□ Yes □	l No
8. CODE FOR SOLO EVENT			
□ AA - Airport-active		□ RRC - Race Trac	:k
□ AI - Airport-inactive			
□ CA - Casino	□ MD - Military Base-decommissioned	□ RRO - R (Road C	
□ CU - College/University	□ OT - Other (list)	□ RRD - Race Trac	
□ GC - Government-city	□ PS - Public School	□ RRH - Race Trac	
<ul><li>□ GS - Government-state</li><li>□ GF - Government-federal</li></ul>	□ PSS - Professional Sports Stadium	□ SM - Shopping N	viaii
GF - Government-rederal			
Event Site Code:	Comment:		
Size of course area (approx.)	: Course ar	ea surface:	
The organizing SCCA Region	on certifies this event will be organized ar	nd conducted in acco	ordance
	ons of the 2018 SCCA National Solo Rules.		
	CCA Member numbers must be sent with	Sala Audit Earm	
_			ماخان بر مرمر
	be completed and returned to the SCCA	•	_
	and insurance fees <u>no later than 14 days a</u>		_
arrears on audit payments	s more than 30 days, further sanction app	lications may not be	approved.
<ul><li>Sanction fee: \$6.50</li></ul>	O per driver		
<ul><li>Insurance fee: \$6.5</li></ul>	50 per driver (minimum insurance fee is \$	130.00)	
<ul> <li>In the event of a cancellat</li> </ul>	ion, written notice is required via e-mail (	sanction@scca.com	)
	r the originally scheduled event date. If w		•
within this time, late char			
within this time, face than	Bes will apply.		
Event Chair/Organizer Signature	Member No.	 Date	
Event Chair/Organizer Signature	ivienibei no.	Date	
Regional Executive (or Designee	e) Signature Member No.	<u> </u>	

Signature of the Regional Executive (RE) is required unless SCCA has received written permission from the RE giving authority to a chairperson or organizer to request sanctions.



**SCCA Sanction** P.O. Box 1833 Topeka, KS 66601 (800)-770-2055 ext. 371

Email: sanction@scca.com