



TEXAS REGION

SCCA

Sports Car Club of America

Solo 2010 Annual Registration

9 events for the Price of 7!

Have we got a deal for you! You can register for all nine 2010 regional SCCA Solo events by paying a discounted entry fee equal to the price of just 7 events. That's right, **9 for the price of 7!!**

Annual Registration only covers regular autocross events including the TMS road course event. As part of the Annual Registration you may reserve your car number in your registered class for all 2010 regional events. Plus, **you can request a preferred work assignment for all the 2010 regional events.** (All efforts will be made to meet your requested work choice when possible.)

On the day of the event, you must still check-in with registration. Also, you must check-in with the Chief of Workers **before 8:15am** in order to secure your preferred work assignment. As with all SCCA events, you must still sign the release waiver, too. And of course, you must have your vehicle Tech'ed.

➔ Car numbers will be reserved on a first-received basis.

➔ Work assignments are based upon indicated preference, skills of the individual and the date of receipt of the annual registration form. **(NO GUARANTEES ARE MADE!)**

Make your check payable to: TEXAS REGION SCCA.

Deadline: Form & check must be received by: **March 17th.**

Fee Structure: (\$25 x 7 events) = \$175 + \$10 additional for TMS road course event = **\$185**

**** NEW For 2010 ****
Online Annual Registration!
(should be live by Jan. 24th)

Print & complete the registration form below and mail with your check to: **Texas Region Solo Registrar**

Please note that there are no refunds for "no-shows". If you do not check in by 8:15am at the event, your preferred work assignment may be reassigned!

c/o Matt Lucas
1937 Autumn Dr.
Roanoke, TX 76262

2010 Texas Region Solo Annual Registration Pre-Pay Form

YOU MUST BE AN SCCA MEMBER IN ORDER TO TAKE ADVANTAGE OF THIS OFFER!

Also, this form must be received by **March 17th** with a check or money order for the full amount of **\$185.**

(Please do not send cash!)

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____

Email Address: _____

Autocross Car Info: (Year/Make/Model) _____

Car Class: _____ Car Number Preferences: 1st _____ 2nd _____ 3rd _____

SCCA Member #: _____

Preferred work assignment choices: (number your choices)

____ Registration ____ Set-up ____ Tech ____ Starter ____ Corner Worker ____ Timing & Scoring

____ Announcer ____ Grid ____ Clean-up

Please indicate below any special needs you might have related to your ability to work.

