



ENTRY FORM

CASCADE SPORTS CAR CLUB'S: 8 HOURS OF THE CASCADES, 4 HOUR ENDURO, AND 2 HOUR MINI ENDURO SATURDAY, SEPTEMBER 29th, 2018

TEAM NAME: <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> DRIVER NAME:	For Registrar Use Only (Team Number)
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STREET ADDRESS, CITY, STATE, ZIP: 	
TELEPHONE NUMBER:	EMAIL ADDRESS (OPTIONAL)

NOTE: EACH DRIVER MUST FILL OUT AN ENTRY FORM WITH ALL INFORMATION REQUESTED

LICENSE #: <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/>	<input type="checkbox"/> ICSCC <input type="checkbox"/> SCCA National <input type="checkbox"/> CACC <input type="checkbox"/> FIA <input type="checkbox"/> ASN <input type="checkbox"/> NASA <input type="checkbox"/> OTHER- Unlisted licenses must be approved by the ICSCC License Director: Steve Clinton prior to entry close. Steve's contact info: license director@icscc.com 360-220-6521	CLASS (CIRCLE ONE) E0 E1 E2 E3 EU ESR MSR ME0 ME1 ME2 ME3
CLUB AFFILIATION: <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/>		

PLEASE ENTER ALL INFORMATION FOR THE VEHICLE YOU ARE ENTERING

CAR MAKE	CAR MODEL	CAR COLOR(S)	<u>ENDURO TRANSPONDER #</u>
CAR NUMBER	SPONSORS		
CAR CLASS (I.E PRO3):		CAR OWNER OR DRIVER DESIGNATED TEAM LEADER	
ENTRY FEE ENCLOSED (US Funds only)	WORKER FUND CONTRIBUTION	TOTAL :	
PERSON/TELEPHONE # FOR EMERGENCY CONTACT:			

DRIVERS ENTERED ON TEAM

DRIVER	NAME	DRIVER	NAME
1		4	
2		5	
3		6	

APPLICANTS LEGAL SIGNATURE: _____ **DATE:** _____