

The Great American Solo Series (GASS)

Universal Event Entry Form

Event Name: _____ Region: _____ Date: _____

DRIVER INFORMATION

Name: _____ Age: _____ Sex: ____ (M/F)

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Work Phone: (____) _____

FAX: (____) _____ E-mail: _____

Driver's License No.: _____ State: _____ Exp. Date: _____

SCCA Region: _____ SCCA Division: _____

SCCA Member No.: _____ Date: _____

In case of emergency notify: _____

Phone: (____) _____

CAR INFORMATION

Solo Class: _____

Check if entry is: - Ladies Class - Series Rookie

Car Number Preferred: 1st: _____ 2nd: _____ 3rd: _____

Make: _____ Model: _____ Year: _____ Color: _____

Tire Brand: _____ Tire Size: _____ Engine: _____

Sponsor: _____ Owner: _____

If 2-driver car, who is other driver? _____ (Must have separate entry)

WORK PREFERENCE

- | | |
|---|--|
| <input type="checkbox"/> Tech | <input type="checkbox"/> Grid |
| <input type="checkbox"/> Timing & Scoring | <input type="checkbox"/> Audit |
| <input type="checkbox"/> Safety (License Req'd) | <input type="checkbox"/> ← Check here if you require a |
| <input type="checkbox"/> Course | non-running work assignment. |
| <input type="checkbox"/> Other: _____ | |

EVENT FEES

- Entry fee enclosed.....\$ _____
- Late fee enclosed (if applicable)....\$ _____
- Party Fee enclosed (if applicable) .\$. _____
- Other Fees (as required).....\$ _____
- TOTAL ENCLOSED:\$ _____

Use one entry form per driver. This form may be duplicated.

FOR OFFICIAL USE ONLY

Class	Number	Date Rec'd	Notified	Signed	Paid