

**2018 MARCH OF DIMES TRACK DAY
DRIVER INFORMATION FORM**

**Drive For Babies Track Day – October 5, 2018
Road America, Elkhart Lake, WI**



Milwaukee Region / Sports Car Club of America Sanction Number: 18-TDPDX-5881-S
HELD UNDER THE 2018 SCCA TIME TRIALS RULES (TTR)

DRIVER MUST FILL IN ALL BLANKS (PLEASE PRINT LEGIBLY)

Driver's Name: _____ SPONSOR _____

Date of Birth: _____

SCCA Member Number: _____ SCCA Region: _____

SCCA Membership Expiration Date: _____

Driver's Address and City / State / Zip:

Diver's Email: _____ Driver's Phone Number: (____) _____

Vehicle Year / Make / Model: _____

EMERGENCY INFORMATION REQUIRED:

Emergency Contact: _____

Home (____) _____ Cell (____) _____

Will Emergency Contact be at the track on event day? Yes / No

I hereby certify that the vehicle and driver, as described above, will appear at this event to participate under the current 2017 General Competition Rules & Amendments of the Sports Car Club of America, Inc., the 2017 Time Trials Rules (TTR), as well as the Supplemental Regulations of this event. The vehicle entered complies with all requirements for the class and category for which it is entered and that all of the information provided above is valid and accurate.

Driver's Signature _____ Date _____

**If the Driver Information form and Group Classification Worksheet are not returned by October 1st,
you will automatically be placed in Group 4 [Novice Group].**

2018 MARCH OF DIMES TRACK DAY
GROUP CLASSIFICATION WORKSHEET



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DRIVER NAME: _____

Please answer the following questions:

- 1) Have you attended any other track days, High Performance Driving Events (HPDE), Performance Driving Experience (PDX), etc? Yes___ No___
If Yes, how many?___ Where?_____
- 2) How many times have you driven in a high-speed high-performance driving event held at RoadAmerica?
Number ___ (*Low-speed touring events do not count*)
- 3) How many times have you autocrosses *in the past two years*?
Never__ 1-10__ 10+__ Where?_____
- 4) Do you hold a valid Competition License from SCCA, NASA, Midwest Council, PCA, etc?
Yes___ (if so, which? _____) No___
If Yes, what licenses?_____
- 5) If necessary, please provide us with any additional information regarding your high-performance driving ability / experience on the lines below or on a separate page:

You will be divided into groups depending on experience levels:

- Group 1: Significant high-speed on-track experience. Advanced to expert high-performance driving skills.
- Group 2: Some high-speed on-track experience. Advanced-high performance driving skills.
- Group 3: Little or no prior high-speed on-track experience. Average high-performance driving skills.
- Group 4: No prior high-speed on-track experience. Beginning high-performance driving skills.

Driver's Signature _____ Date _____

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ENTRANT/GUEST FORM

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NOTE: Entrant *IS NOT* Driver.



Entrant Name _____ Date of Birth _____

SCCA Member Number: _____ SCCA Region: _____

SCCA Membership Expiration Date: _____

Entrant's Address and City / State / Zip:

Entrant's Email: _____ Entrant's Phone Number: (____) _____

EMERGENCY INFORMATION REQUIRED:

Emergency Contact: _____

Home (____) _____ Cell (____) _____

Will Emergency Contact be at the track on event day? Yes / No

Entrant's Signature _____ Date _____

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you will automatically be placed in Group 4 [Novice Group].