

Car # and Class _____

SISKIYOU SPORTS CAR CLUB REGISTRATION FORM

PLEASE PRINT

Driver's Name _____ Dr. License # _____

Address _____ Email _____

City / State / Zip _____ Phone _____

SSCC Member Y N / Car Club Affiliation _____ Vehicle Year/Make/Model _____

RELEASE

I have read the rules governing this S.S.C.C. event and agree to abide by them. I agree to abide by the decisions of the Competition Directors of the SISKIYOU SPORTS CAR CLUB, INC. on any questions or disputes arising during the course of this event.

I further agree to use the course of this event at my own risk and do hereby release and discharge the SISKIYOU SPORTS CAR CLUB, INC., together with its assignees, officers, agents, employees and officials, and their successors from all liability for personal injury that may be received by this entrant, and from all claims and demands to personal property growing out of or resulting from this event, or caused by any construction or condition of the course over which this event is held. I further agree and represent that sanctioned and supervised automobile racing, such as this, are not ultra hazardous activities.

I certify that the vehicle and safety equipment I will use are in good condition and proper working order. I hereby confirm that I have not, nor shall not, indulge in intoxicating beverages or drugs immediately prior to or during participation in this event. I certify that I hold a valid driver's license. I hereby authorize the use of the above information for public information either in print or for broadcast for information purposes only.

Driver's Signature _____ Date _____

Driver's Signature _____ Date _____

Driver's Signature _____ Date _____

Driver's Signature _____ Date _____

Driver's Signature _____ Date _____

Driver's Signature _____ Date _____

Driver's Signature _____ Date _____

Driver's Signature _____ Date _____

Parent / Guardian Signature if under 18 _____