

ENTRY FEE FORM (CHECK ALL THAT APPLIES)

SILVER STATE CLASSIC CHALLENGE -SEPTEMBER 17-20, 2020

- LAS VEGAS- THURSDAY WELCOME LUNCHEON ELY- THURSDAY EVENING FUN EVENT
 ELY- FRIDAY EVENING FUN EVENT LAS VEGAS-BANQUET-SUNDAY

CAR NUMBER: Choice #1 _____ Choice #2 _____ Choice #3 _____

If all the numbers selected have been previously assigned or no choices are specified, a number will be assigned to you by SSCC. Select between **250 and 500**. No numbers beginning with **zero (0)** or **ending with (1/2) halves**. Numbers are assigned on a first come basis. Participants owning a **Lifetime number** are never assigned. **ALL Drivers and Navigators/Co-drivers MUST have a current SSCC Racing License to enter. Pre-printed numbers will be ordered for all entries paid in full 3 weeks prior to event.**

DESCRIPTION	FEE	SSCC	TOTAL
		SEPT	FEES
DRIVER ENTRY FEE ADMITS ONE (1) TO THE BANQUET			
Unlimited Division (180+ mph) **	\$900		
Super Sport Division (160-170-180 mph) **	800		
Grand Sport Division (130-155 mph) **	770		
Grand Touring Division (115-125 mph) **	675		
Touring Division (95-110 mph) **	560		
Navigator/Co-Driver Participation Fee **	175		
ADD if entering within 14 days of event	50		
NAVIGATOR/CO-DRIVER ENTRY FEE ADMITS ONE (1) TO THE BANQUET			
BASIC TIMING (NO electronics-Stopwatch, etc.) (Circle one)	YES	NO	
Driving School Instruction	207		
SSCC Racing License- Driver & Navigator/co-driver Non Refundable	50 each		
Half-Mile Shootout – Friday/Sat Event ** Speed Certificate Check One <input type="checkbox"/> Street <input type="checkbox"/> Super Street <input type="checkbox"/> Unlimited	200		
One Mile Shootout – Friday/Sat Event ** Speed Certificate Check One <input type="checkbox"/> Street <input type="checkbox"/> Super Street <input type="checkbox"/> Unlimited	200		
ELY Fun Evening Event, Thursday & Friday Reception	<i>Included</i>	xxxxx	
AWARD BANQUET in Las Vegas	<i>Included</i>	xxxxx	
Award Banquet – (additional tickets) – Non Refundable	50 each		
Speed Certificate- 318 TRAP 318 AVERAGE	30 each		
Team Challenge Discount (If on a Team at Last Event)	(25)		
DEDUCT if entering A Shootout Event & Hwy 318	(50)		
Driver T-Shirt (circle one) SMALL MED LARGE	XLG	XXLG	XXXLG
Navigator (circle one) SMALL MED LARGE	XLG	XXLG	XXXLG
SEE OTHER SIDE	TOTAL		

**** CANCELLATION POLICY:** Cancellations over Thirty (30) days before the event will forfeit \$150 of the fees paid. Entries canceled between 15 and 30 days before the event will forfeit 50% of fees paid. Entries canceled less than 15 days prior to the event will receive no refund. Event no-shows forfeit all fees. By signing the entry application and there by entering the event, you are certifying your understanding and acceptance of these terms.

SSCC will make every effort to ensure that the Event will be started and completed in a timely manner. There may be occasions where Acts of God or Governmental Intervention may prevent the start and/or completion of the Event. If such an occasion were to arise, SSCC cannot issue refunds or rain checks.

Participant's Signature: _____

Date: _____

Please include a check or money order payable to SSCC Inc., or use the area below for Credit Card (**MasterCard/Visa only**).

Forward this form, your entry application and other forms to:

SSCC at 1139 E. Aultman St, Ste C Ely, NV 89301 Phone (775) 289-6900 Fax (775) 289-6911

_____ - _____ - _____ - _____ Exp Date: _____

Card Verification # _____

Signature: _____

Name as it appears on the Credit Card: _____

SILVER STATE CLASSIC CHALLENGE

DRIVERS ENTRY APPLICATION

PARTICIPANT INFORMATION

DRIVER INFORMATION

PLEASE ATTACH: PHOTOCOPY OF YOUR VALID DRIVER'S LICENSE & MEDICAL INSURANCE CARD

Name: _____ Phone: Days: (____) _____

Address: _____ Phone: Evenings: (____) _____

City: _____ State: _____ Zip: _____ Fax: (____) _____

Date of Birth: _____ E-Mail: _____

TARGET SPEED SELECTED: _____

(Example 120 mph, 160 mph, etc.)

T-SHIRT SIZE (CIRCLE ONE) SMALL MEDIUM LARGE X LARGE XX LARGE XXX LG

ALL FIRST TIME PARTICIPANTS: IT IS MANDATORY THAT ALL FIRST TIME DRIVING PARTICIPANTS SIGN UP AND ATTEND THE INSTRUCTIONAL SESSION ON THURSDAY.

VEHICLE INFORMATION

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

NAVIGATOR-PLEASE ATTACH PHOTOCOPY OF MEDICAL INSURANCE CARD

Name: _____ Phone: Days: (____) _____

Address: _____ Phone: Evenings: (____) _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ E-Mail: _____

T-SHIRT SIZE (CIRCLE ONE) SMALL MEDIUM LARGE X LARGE XX LARGE XXX LARGE

I hereby certify that the information above is correct and I understand that any misrepresentation is grounds for disqualification from the event and forfeiture of my entry fee. I understand that SSCC may reject my entry for any reason. I understand I must have current Medical Insurance coverage at the time of the event.

Signature of Driver

Date

Signature of Navigator

Date