

**Badlands Region SCCA
Solo II Event Registration**

Location _____

Date _____

Competitor

Name _____

Address _____

Telephone Number _____

Email Address (to receive event results) _____

Age _____

Driver's License _____

State/Number/Exp. Date _____ / _____ / _____

SCCA Member No. _____

Payment

Type Cash Check Number _____

Amount _____

Received by _____

Car

Model year _____

Make _____

Model _____

Color _____

Competition class _____

Number _____

Previous Badlands Region inspection
this season?

Yes No

Damaged since previous inspection?

Repaired since previous inspection?

Modified since previous inspection?

I agree to comply with the current SCCA Solo Safety Rules.

I agree to comply with event-specific safety rules as communicated by Event Officials.

I agree that during the event I will not use or be under the influence of any drug or alcohol which could impair my ability to safely operate my vehicle or otherwise participate.

I agree to keep my vehicle under control and operate it in a safe manner at all times during this Solo II event.

I recognize that there are hazards associated with participating in Solo II driving events and voluntarily accept those hazards.

I accept that it is my responsibility as an event participant to bring to the attention of the Event Officials any safety concerns that I may have, including but not limited to, concerns about the condition or configuration of the course, condition of participating vehicles, and actions of other participants.

I accept that it is my responsibility to cease participation in the event if said safety concerns are not corrected to my satisfaction; I am a voluntary participant.

I certify that all information and assertions provided here are true and correct.

Participant Signature _____

Date _____

Legal Guardian Signature _____

Printed Name _____

Date _____