



# Open Practice

Saturday – March 13, 2010

San Diego Qualcomm Stadium, West Lot

*Held under SCCA Solo Rules and San Diego Region Solo Supplementary Regulations*

Registration & Tech – 8:00 to 11:30 A.M. • First Car Out – 9:00 A.M.

All drivers **MUST** be members of the SCCA. Weekend SCCA memberships available at event (\$15). All drivers **MUST** have a San Diego Region Solo Card. Region Weekend Pass available at event.

Prepaid, pre-registration by mail **ONLY** (no phone registration). Entry and wait list will be posted at: <http://www.sdsolo.com> (this is **NOT** an official forum of SCCA SDR Solo).

Registration check-in cutoff for Group A & B is 8:40 A.M. and for Group C & D is 11:30 A.M. After that we will allow stand-by drivers to fill in any opening.

**Practice Format:** limited to 100 entries; four run groups of 25 each; 90 min. per group

	<u>Run</u>	<u>Work</u>
<b>Group A</b>	1	2
<b>Group B</b>	2	1
Lunch	30 min.	
<b>Group C</b>	3	4
<b>Group D</b>	4	3

Jr. Karts will run in the beginning of Group C. Each kart will make 8 back-to-back runs. Second driver sharing kart will run in beginning of Group D.

**ENTRY FEE:** Primary Driver \$40 (any driver entering a car in a run group)

*All Secondary Drivers \$10 (any non-primary driver. e.g. a second driver sharing an entry in a run group, driving instructors, etc.)*

**SAFETY REQUIREMENTS:** Car must be able to pass safety inspection, helmet (Snell 95 or newer)

**NOISE RESTRICTIONS:** A Maximum noise level of 93.0 dBA @ 50 ft for all participants will be enforced

**EVENT CO-CHAIR:** Bill Schiller (858) 271-7226  
& Matt Wells

**SAFETY STEWARD:** Jeff Lonsdale

Consumption of INTOXICANTS by participants and spectators is prohibited!

San Diego Region Autocross Information • [www.sdr-scca.com/solo2](http://www.sdr-scca.com/solo2)

## Event Pre-registration Form

March 13, 2010 open practice at San Diego Qualcomm Stadium, West Lot

Name: \_\_\_\_\_

Group: \_\_\_\_\_

Address: \_\_\_\_\_

1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> choice \_\_\_\_\_

\_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_ 4<sup>th</sup> Choice \_\_\_\_\_

Phone: \_\_\_\_\_

Make check payable to: **DCCSD**

Email Address: \_\_\_\_\_

Send completed registration form and entry fee to:

Solo Card No.: \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_

Please cancel entry  
by Thursday, March 11  
or **NO** refund.

Kyle Pantaleon  
DCCSD Practice  
5356 Sunglow Ct.  
San Diego, CA 92117  
858-292-9929 (no phone registration)