

SCAT

Southern California Autocross Team

Open Practice

Saturday – March 2, 2013
San Diego Qualcomm Stadium, Southeast 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 membership is available at event (\$15). All drivers MUST have a San Diego Region Solo Card. Weekend Region Solo Pass is available at event (\$5).

Prepaid, pre-registration by **MAIL ONLY** (no phone registration). Entry and wait list will be posted at: <http://www.sdsolo.com/forum/> - under the <Practice Event Entry Lists> thread.

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 wait list drivers to fill in any opening.

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

	Run	Work
Group A	1	2
Group B	2	1
Lunch	30 min.	
Group C	3	4
Group D	4	3

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

ENTRY FEE: Primary Driver \$45 (any driver entering a car in a run group)

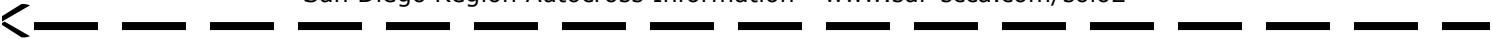
All Secondary Drivers \$15 (a secondary driver is any non-primary driver. e.g. a second driver sharing an entry in a run group, driving instructors, etc.)

SAFETY REQUIREMENTS: Vehicle must pass safety inspection, helmet (Snell 2000 or newer)

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

EVENT CHAIR: Scott Lewis (619) 890-8305
SAFETY STEWARD: Dave Boles

Consumption of INTOXICANTS by participants and spectators is prohibited!
San Diego Region Autocross Information • www.sdr-scca.com/solo2



Event Pre-registration Form

March 2, 2013 open practice at San Diego Qualcomm Stadium, Southeast Lot

Name: _____

Group: _____

Address: _____

1st Choice _____ 2nd choice _____

3rd Choice _____ 4th Choice _____

Phone: _____

Make check payable to: **SDR-SCCA**



Email Address: _____

Send completed registration form and entry fee to:

Solo Card No.: _____

Amount Enclosed: _____

Please cancel entry by Thursday, February 28 or **NO** refund.

D. Bristol
SCAT Practice
5880 Odessa Ave
La Mesa, CA 91942
(619-784-3953) (no phone registration)