



SPORTS CAR CLUB OF AMERICA ARCTIC ALASKA REGION MEMBERSHIP APPLICATION

DEAR PROSPECTIVE SCCA MEMBER,

TO APPLY FOR MEMBERSHIP IN THE SCCA, THE WORLD'S LARGEST MEMBER PARTICIPATION AUTOMOTIVE ORGANIZATION, PLEASE COMPLETE THE FORM BELOW IN FULL AND MAIL WITH PAYMENT TO: SCCA ARCTIC ALASKA REGION, P.O. BOX 220108, ANCHORAGE, AK 99522

MAILING ADDRESS

NAME (PLEASE PRINT) _____

ADDRESS _____

CITY,S, ZIP _____

E-MAIL: _____

PHONE NUMBERS HOME # _____

WORK # _____ CELL # _____

CAN THESE NUMBERS BE LISTED IN OUR MEMBER ROSTER?

HOME # YES NO WORK # YES NO CELL # YES NO

PERSONAL INFORMATION

DATE OF BIRTH _____

MARITAL STATUS MARRIED SINGLE OTHER

SPOUSE NAME AND/OR FAMILY MEMBERSHIP NAMES AND BIRTHDATES:

MEMBERSHIP DUES INFORMATION

MEMBERSHIP IN THE SCCA IS DUAL-NATIONAL AND REGIONAL. DUES ARE FOR ONE (1) YEAR FROM DATE RECEIVED BY OUR NATIONAL OFFICE. PLEASE MAKE CHECK PAYABLE TO SCCA.

MEMBERSHIP TYPE.....	NATIONAL.....	REGIONAL	TOTAL
REGULAR MEMBER	\$ 60.00	\$ 15.00	\$ 75.00
SPOUSE MEMBER	\$ 20.00	\$ 5.00	\$ 25.00
FIRST GEAR (TO AGE 24).....	\$ 35.00	\$ 10.00	\$ 45.00
FAMILY MEMBERSHIP	\$ 95.00	\$ 20.00	\$ 115.00
MILITARY MEMBERSHIP.....	\$ 60.00	\$ 15.00	\$ 75.00*

*NATIONAL OFFERS REBATE TO MEMBER WITH COPY OF MILITARY ID
I HEREBY APPLY FOR MEMBERSHIP IN THE SPORTS CAR CLUB OF AMERICA, INC., AND ARCTIC ALASKA REGION #67 AND I AGREE TO ABIDE BY THE BYLAWS OF EACH.

APPLICANT SIGNATURE _____

I UNDERSTAND THAT THE ARCTIC ALASKA REGION IS CURRENTLY HAVING A MEMBERSHIP RECRUITMENT CONTEST AND I WOULD LIKE _____ TO BE CREDITED WITH MY SCCA MEMBERSHIP.

QUESTIONS & ANSWERS!

•HAVE YOU EVER BEEN AN SCCA MEMBER BEFORE? YES NO

•IF YES, WHAT WAS YOUR SCCA# AND LAST YEAR DUES WERE PAID?

•WHAT IS YOUR OCCUPATION?

•AT THIS TIME, WHAT ARE YOUR MAIN AREAS OF INTEREST IN THE ARCTIC REGION OF SPORTS CAR CLUB OF AMERICA?

- SOLO (AUTOCROSS)
- ROAD RALLYING
- RALLYCROSS
- CLUB RACING
- EVENT OFFICIAL
- CORNER WORKER
- REGION OFFICER
- SOCIAL EVENTS
- OTHER, PLEASE LIST

OFFICIAL USE ONLY — THANK YOU!

DATE RECEIVED _____

CHECK OR CASH _____

DATE TO KANSAS _____

NOTES _____

MEMBER # _____

EXPIRATION DATE _____

SCCA DATE _____