

# F2000/F1600 2012 Annual Credential Application



## Credential Type

Driver  Crew  Corporate  Official  Sponsor  Guest  Media  TV

## Applicant Information

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address \_\_\_\_\_ Work Phone: \_\_\_\_\_  
\_\_\_\_\_ Cell Phone: \_\_\_\_\_

## Emergency Contact

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Affiliation

In order to receive an Annual Credential, you must be affiliated with a team participating in an SCCA Pro Racing Sanctioned Series, an employee of a Corporate Member, or an SCCA Official.

Affiliation: (Team or Company Name): \_\_\_\_\_

## SCCA Membership

You must have an SCCA Membership to receive an Annual Credential.

I have a current SCCA Membership      SCCA Member Number:  Exp.   
 Renew my existing SCCA Membership       Create a new SCCA Membership  
 Individual    \$80     Family    \$100     First Gear    \$45 (24 yrs & under)

## Release and Waiver of Liability

An original, color copy of the attached **Release and Waiver of Liability** must be returned with this application, notarized or signature witnessed by an SCCA Pro Racing Official.

Participants 16 to 18 years of age must return an original, color copy of the **SCCA Minor Participant Waiver** with this application, notarized or signature witnessed by an SCCA Pro Racing Official.

## Photo

A photo must be included with this application, or E-Mailed to [photo@sccapro.com](mailto:photo@sccapro.com).

## Payment

Payment Method:  Check  Visa  Master Card  Discover

Name on Card: \_\_\_\_\_

Card No: \_\_\_\_\_ CCV: \_\_\_\_\_ Exp. Date \_\_\_\_\_

## Submission

This form, and the **Release and Waiver of Liability**, should be mailed to:

**SCCA Pro Racing**  
P.O. Box 2187  
Topeka, KS 66601-2187

# RELEASE AND WAIVER

## RELEASE AND WAIVER OF LIABILITY ASSUMPTION OF RISK AND INDEMNITY AGREEMENT (Read Carefully Before Signing)

IN CONSIDERATION of being permitted to compete, officiate, observe, work for, or participate in any way in any Sports Car Club of America or SCCA Pro Racing events or activities (EVENTS), or being permitted to enter for any purpose any RESTRICTED AREA thereof (defined as any area requiring special authorization, credentials or permission to enter, or any area to which admission by the general public is restricted or prohibited), I, for myself, my personal representatives, heirs, and next of kin:

Hereby acknowledge, agree and represent that I will immediately upon entering any such RESTRICTED AREAS, and will continuously thereafter, inspect the RESTRICTED AREAS which I enter, and I further agree and warrant that, if at any time, I am in or about the RESTRICTED AREAS and I feel anything to be unsafe, I will immediately advise the officials of such and will leave the RESTRICTED AREAS and will refuse to participate further.

Hereby RELEASE, WAIVE, and DISCHARGE the promoters, participants, racing associations, sanctioning organizations, or any subdivision thereof, track operators, track owners, officials, car owners, drivers, pit crews, rescue personnel, any person in any RESTRICTED AREA, sponsors, advertisers, owners and lessees of premises used to conduct the EVENTS, premises and event inspectors surveyors, underwriters, consultants and others who give recommendations directions, or instructions or engage in risk evaluation or loss control activities regarding the premises or EVENTS and each of them, their directors, officers, agents, and employees, all for the purposes herein referred to as "RELEASEES," FROM ALL LIABILITY TO ME, my personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFORE ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENTS, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. In addition, I COVENANT NOT TO SUE any of the RELEASEES based upon any claim arising out of any of the EVENTS.

Hereby ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENTS whether caused by the NEGLIGENCE OF RELEASEES or otherwise.

Hereby AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the RELEASEES and each of them from any loss, liability, damage, or cost they may incur due to claims brought against the RELEASEES arising out of my injury, or death or damage to my property while I am in the RESTRICTED AREAS and/or while competing, practicing, officiating, observing or working for or for any purpose participating in the EVENTS and whether caused by the negligence of the RELEASEES or otherwise.

Hereby acknowledge that THE EVENTS ARE POTENTIALLY VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. I also expressly acknowledge that INJURIES MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.

HEREBY agree that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the RELEASEES, INCLUDING NEGLIGENT RESCUE OPERATIONS and is intended to be as broad and inclusive as is permitted by the laws of the Province or State in which the Event(s) is/are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, not withstanding, continue in full legal force and effect.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

### ALL SCCA PRO RACING EVENTS

### ALL SCCA PRO RACING EVENTS HELD IN 2012

Description and Location of Event

Event Dates

RELEASOR: \_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature (I HAVE READ THIS RELEASE)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Series Participating In

\_\_\_\_\_  
Affiliation (team or company name)

State of: \_\_\_\_\_

County of: \_\_\_\_\_

(Notary Stamp)

The above signature was witnessed by me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public or SCCA Pro Racing Official