



www.hillclimb.org



www.sccnh.org

The Sports Car Club of New Hampshire is proud to continue a 55 year tradition with the 2010 SCCNH Fall Mt. Ascutney Hillclimb

September 17-19, 2010 – Event Chairs: Dave & Diane Burden

“Regular” Hillclimb Entry: Entry Fee: \$145.00 Car # _____ Class _____
“Rally Car” Entry: Entry Fee: \$165.00 Car # _____ Class: _____
(Entry fee includes lunches for entrants, crew and guests can buy lunches each day for \$5 per person)

Entries will be cut off at 55 so register early!

PLEASE NOTE: A \$35.00 LATE FEE must be added to all entry forms NOT received by Sept 14, 2010!

Register and pay online at <http://www.sccnh.org/hillclimb.html>

Driver Information: Novice? Y N Bringing workers (18+)? How many? _____
Name _____ Age: _____ D.O.B. _____
Address _____ City, State, ZIP _____
Telephone _____ Email _____
Competition License Number: (Rally Car teams only) _____
Sanctioning Body: (Rally Car teams only – circle one) Rally America CARS NASA SCCA

Navigator Information: (for Rally Car teams only)
Name _____ Age: _____ D.O.B. _____
Address _____ City, State, ZIP _____
Telephone _____ Email _____
Competition License Number: (Rally Car teams only) _____
Sanctioning Body: (Rally Car teams only – circle one) Rally America CARS NASA SCCA

Emergency Contact Information:
Name _____ Phone Number #1: _____
Relation _____ Phone Number #2: _____
Is this person at the event? (Circle one) Yes No

Car Specification Information:
Year _____ Make _____ Model _____ Color _____
Hillclimb Car Classification: U _____ SP _____ P _____ Formula Libra _____
Weight _____ Displacement _____ Total Factor _____
Rally Car: Logbook Number _____
Sanctioning Body Rally America CARS NASA SCCA

Release / Waiver:

I agree to abide by the rules and regulations of the New England Hillclimb Association and the Sports Car Club of New Hampshire and obey workers and officials. I understand that the decision of the Event Chairman is final. I understand that I am responsible for my safety and the terms of all releases required of participants at this event. I agree to be examined by medical personnel at any time and hereby give my permission to receive medical treatment or transport. In giving permission for my automobile to be used in this event, I understand that any risk, loss, or damages are the burden of the entrant(s), and I have knowledge of the event. I understand that failure to pass technical inspection or cancellation of the event (partial or complete) may not entitle me to any sort of refund. Rally teams agree to abide by Rally America rules for car prep and safety regulations.

Driver's Signature: _____ Date _____

Navigator's Signature: _____ Date _____
(if applicable)

Registration Checklist: (For SCCNH official use only)

____ Insurance Release _____ Driver's License _____ State Release
____ Medical Card _____ Tech Sheet _____ Entry Fee Paid
____ Rally Driver's License _____ Rally Navigator's License _____ Rally Log Book

Please mail completed Entry Form with payment to: Diane Burden
Make checks payable to: Sports Car Club of New Hampshire PO Box 700, Claremont, NH 03743
Questions? Contact Dave or Diane Burden at 603-558-1551/603-558-1553 or dburden@hughes.net