



# Application

## Central Florida Region Sports Car Club of America



PLEASE TYPE OR PRINT:

**\$85 Regular Membership**  
Includes \$65 National dues.

**\$45 First Gear (under age 25)**  
Includes \$25 National dues,  
Includes ability to hold  
Club Racing, PRO Rally or  
Solo1 Competition licenses.

**\$105 Family Membership**  
For regular member, spouse  
and children under age 21.  
Includes \$85 National Dues.

**\$30 Subscription to *The Checker*  
only.**

Total membership costs include  
National and Regional dues for one  
year. Also includes one subscription to  
*SportsCar Magazine* and *The Checker*  
per regular, First Gear, or family mem-  
bership. Membership dues are not a  
charitable contribution.

**MAIL Membership Chair**  
**TO: Joyce Hayward**  
**457 Drage Drive, Apopka FL**  
**32703**

**407-884-7889**  
**SCCAOne@aol.com**

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_

E-Mail \_\_\_\_\_

First Gear birth date \_\_\_\_\_

Spouse Name, if joining Club \_\_\_\_\_

Children's names and birth dates if Family membership  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SCCA Region Preference Central Florida Region (83)**

I am interested in the following SCCA activities:

Pro Racing  Club Racing  Rally  Solo  Official

I hereby apply for membership in the Sports Car Club of America, Inc. and its  
Central Florida Region and agree to abide by the bylaws.

Enclosed is my check or cash for \$ \_\_\_\_\_ ,or

(check one)  Visa  MasterCard

Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_