

This is your 2012 CCS Northeast Region license application.

This license will allow you to race at any CCS event anywhere in the country.

Tracks that you may be interested in racing at included.

Summit Point WV.

New Jersey Motorsports Park

NHMS Loudon NH

Have a good season.....

Instructions for 2012

*****Please note that checks are now made payable to GPPRO (Gran Prix and Production Racing Org.)*****

The medical form is mandatory. You will not be issued a license without this form.
The sponsor form is optional

Please do not write any notes on the application form. Attach a separate note.

Please print the information in the blank spaces provided. It is important that you print clearly and precisely as most of the errors are not "typo" problems, but the results of our inability to read the forms. Do not abbreviate city names.

Make sure we have complete personal information including name, address, social security number, day and night time phone numbers, e-mail address, birth date, and age. (Applicants under the age of 18 must have a signed notarized release form from their parent or legal guardian on file with CCS / ASRA before a competition license will be issued.) Applicant must be a minimum of 16 years old to apply for an ASRA Pro Series license. Applicant must be a minimum of 12 years old to apply for a Championship Cup Series license and those who are between the ages of 12 and 16 may have their license restricted to use in certain classes.

Applications cannot be processed without a social security number or equivalent. The insurance information is required.

If you are applying for an ASRA Pro license you should download the appropriate license application from the CCS Website. www.ccsracing.us

The license fee for 2012 is \$120. After July 1, 2012 the fee is \$85 and after September 1, 2012 the fee is \$55. Make all checks payable to GPPRO.

Your 2011 number is reserved for you until January 15, 2012. After January 15, 2012 requests for new numbers will be handled as follows.

Single digit numbers are reserved for past multiple class champions.

Two digit numbers (Expert only) will be issued according to the total number of Expert points a rider accumulated in 2011 to riders whose request is post marked prior to January 16, 2012. Applications post marked after January 15 will be issued numbers on a first come first served basis.

After January 15, 2012 all **three digit** requests for new numbers will be issued on a first come first served basis. If you are late in sending in your renewal and your number has been requested by another rider you will be issued a number that will cause you the least grief.

****** Please make all checks payable to GPPRO (Gran Prix and Production Racing Organization) ******

Enclose your check or money order for the correct fee (or fill in the credit card info) and mail to:

GPPRO - 7925 W. Riverbend Rd – Crystal River, FL 34428

We go by the postmark date. There is no need to overnight this application but should you insist; assure that the instructions are to leave the mail, as we are not always here to sign for it.

Phone number for GPPRO for all licensing questions. 352-795-4031
Please do not fax this application. It will not be accepted.

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2012 Championship Cup Series Medical Form

Last Name _____ First _____

Address _____

City _____ St. _____ Zip _____

Phone # _____ Date of Birth _____

Last tetanus shot _____ Organ Doner _____

Allergies _____

Regular Medications _____

Medical Problems (Heart, Kidneys, Epilepsy etc.) _____

List major surgery or injuries in last 5 years _____

Circle: Glasses Contacts Dentures Other _____

In case of emergency contact:

Name _____

Address _____

City _____ St. _____ Zip _____

Phone # _____

Relationship _____

Do you have personal medical insurance Yes() No()

Company Name _____

Policy # _____



Sponsor Listings



This is a new listing: ✍ Addition: ✍ or Deletion: ✍ (please explain)

Last 6 digits of SSN # _____ Comp # _____ Region _____

Name _____

Check all that apply: CCS: _____ ASRA: _____ TC: _____

List your sponsors in the order in which you would like them to appear on the results. We may have to make adjustments to allow them to fit in the computer space available.

Only list the companies or individuals that are actually providing financial aid. If you give sponsor exposure away, it lowers the value to everyone who participates.

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

7. _____ 8. _____

9. _____ 10. _____

11. _____ 12. _____

13. _____ 14. _____

15. _____ 16. _____

17. _____ 18. _____

Please return the completed form to registration before 9:00 am for entry into the computer.