



2001 CREDENTIAL APPLICATION FOR THE STAR MAZDA SERIES

Please type or print legibly and complete all of the requested information.

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home #: \_\_\_\_\_ SS #: \_\_\_\_\_

Business #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Team Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

FOR DRIVERS ONLY:

Home Town: \_\_\_\_\_

Previous Racing Licenses Held: \_\_\_\_\_

Type of Racing/Cars/Years Run: \_\_\_\_\_

SPORTS CAR OFFICE USE ONLY
Date Received
Check/Cash/MO/Credit Card
Fee
Approval Code
License #
Date Issued
Approved By

Type of Credential Applying For (Check One):

- Star Mazda Driver Credential (Season Long) \$275
Star Mazda Crew Credential (Season Long) \$100
Star Mazda Driver Credential (One Race Only) \$150

I hereby apply for membership as indicated in Professional Sports Car Racing, Inc. ("SPORTS CAR") and authorize SPORTS CAR to represent my interests as they may appear in auto racing matters. I acknowledge that I am familiar with the current rules of SPORTS CAR and Star Mazda Series and agree to abide by the current rules of SPORTS CAR and Star Mazda Series as they may be amended from time to time.

RELEASE: SPORTS CAR, Valley Motor Center Racing Inc., DBA Star Mazda Series and their duly authorized agents and assigns, may use the APPLICANT'S name, likeness and photographs of the APPLICANT or the APPLICANT'S cars, including photographs of the APPLICANT or the APPLICANT'S cars taken during the EVENT(S), in any way, medium or material, for promoting, advertising, recording or reporting an SPORTS CAR sanctioned EVENT(S) before, during and after such EVENT(S), including, but not limited to television and radio broadcast film production, videotape reproductions and the like, and do hereby relinquish all rights thereto for these purposes.

I understand that acceptance of this membership application and fee by any SPORTS CAR official does not constitute approval of the application, and that all applications must be approved by SPORTS CAR Headquarters.

APPLICANT'S LEGAL SIGNATURE x \_\_\_\_\_ Date \_\_\_\_\_
(ALL APPLICANTS MUST SIGN)

CREDIT CARD PAYMENT INFORMATION: Type of Card: MasterCard VISA American Express

Account #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Total Amount Charged: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

By signing below, I hereby authorize Professional Sports Car Racing, Inc. to charge the above credit card.

Cardholders Signature x \_\_\_\_\_ Date \_\_\_\_\_