



RoadRally Audit Form

Event name: _____ Event date: _____

Sanction Number: _____ (found on insurance certificate) SCCA Region _____

Number of cars entered _____

Event Type: National Divisional Regional Social Charity

Were there any safety incidents requiring the filing of an Incident Report Form? Yes _____ No _____

If yes, has the form been sent to Risk Management? Yes _____ No _____ Date Sent _____

National RoadRally	\$14.00 per car (\$10.00 per car sanction fee plus \$4.00 per car insurance fee)
Divisional RoadRally	\$8.00 per car (\$4.00 per car sanction fee plus \$4.00 per car insurance fee)
Regional RoadRally	\$6.00 per car (\$2.00 per car sanction fee plus \$4.00 per car insurance fee)
Social RoadRally	\$20.00 per event flat fee – please send in car count
Charity RoadRally	\$80.00 per event flat fee – please send in car count
Multi Day (> 3 days)	Sanction: add \$2.00 per day over 3 days to per-car price; Ins: add \$1.00 per day over 3 days
USRRC	Will be part of contract when the Region is granted approval to hold the USRRC

AUDIT WORKSHEET

Number of Cars _____ x _____ Per Car Sanction and Insurance Fee = _____

Multi-day events: Number of event days over three _____ x \$3.00 x Number of cars = _____

Flat fee for Social Rally, Charity rally, or USRRC = _____

Late Fee if applicable (\$25.00 after 14 days, \$50.00 after 30 days) = _____

Total Audit Fee due = _____

VISA/MASTERCARD/DISCOVER Accepted:

_____ Expiration Date _____ 3 digit code _____

On behalf of the _____ Region, SCCA, I hereby certify that the information on this RoadRally audit form is correct and that we understand the rules and penalties stated herewith.

Event Organizer Signature

Date

This RoadRally audit form must be completed and returned to the SCCA Rally Department with the appropriate sanction and insurance fees no later than 14 days after the event. An event is considered complete upon receipt of this audit form with payment.

SCCA RALLY 6620 SE Dwight St., Topeka, KS 66619

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