



# Rally Safety Steward

## License Application

Please complete application experience for RallyCross or RoadRally Safety Steward licenses on reverse side.

Office Use Only

Date Rcvd \_\_\_\_\_

Please complete the following:

Change of Address?  Yes

Member #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Region: \_\_\_\_\_ Division: \_\_\_\_\_

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

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Country: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (H) (\_\_\_\_) \_\_\_\_\_ (W) (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Check the type of License you are applying for:

- RallyCross Safety Steward       RoadRally Safety Steward Instructor  
 RoadRally Safety Steward

### Important Note:

Membership in the SCCA is required for all licensed Rally Steward Positions.

**Applicants must be over 18 years of age to qualify.**

If you are not a member, a membership application with the correct funds must be presented at the time of this application.

### SCCA RallyCross

Signature of **Divisional RallyCross Steward** is required for all **RallyCross Safety Steward** applicants.

Divisional RallyCross Steward Signature	Member #	Date
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**RENEWAL** for RallyCross Safety Steward license automatically renews with your SCCA membership renewal.

### SCCA RoadRally

**INITIAL ROADRALLY SAFETY STEWARD LICENSE** requires Divisional RoadRally Steward and RoadRally Safety Steward Instructor signatures. Contact your Divisional RoadRally Steward for information regarding a Safety Steward seminar.

RoadRally Safety Steward Instructor Signature	Member #	Date
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Divisional RoadRally StewardSignature	Member #	Date
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**INITIAL ROADRALLY SAFETY STEWARD INSTRUCTOR LICENSE:** Contact the RoadRally Manager for information.

RoadRally Safety Steward Instructor Signature	Member #	Date
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RoadRally Safety Steward Liasion Board Member	Member #	Date
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**RENEWAL** for RoadRally Safety Steward and Road Rally Safety Steward Instructor license automatically renews with your SCCA membership renewal.

I hereby certify that the information above is correct. I realize any falsification will result in the loss of my RoadRally or RallyCross License. Additionally, I agree to abide by the provisions of the RoadRally and RallyCross rules and regulations. By accepting membership in the SCCA all members agree to conduct themselves according to the highest standards of behavior and sportsmanship in a manner that shall not be prejudicial to the reputation of the Club or fellow members.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Summary Of Experience

## Initial Application Only

Name: \_\_\_\_\_ Member #: \_\_\_\_\_

**SCCA Involvement** (worker, organizer, driver type(s) or license(s) held):

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**Education:**

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**Related Rally or RallyCross or Race Experience:**

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**Steward or Event Management Experience:**

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**Reasons you feel you are qualified for and want the position:**

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