



Office Use Only	
Date Rec'd	_____
License Type	_____

RoadRally Safety Steward Application

If mailing label is not affixed above or is incorrect, complete the following:

CHECK ONE: Renewal New

NAME _____

ADDRESS _____

CITY _____ STATE ____ ZIP _____

EMAIL _____

TELEPHONE (h) _____ (w) _____

SCCA MEMBER # _____ REGION _____ DIVISION _____

LICENSE RENEWAL

The signature of the Regional Executive, **RoadRally** Board member, Divisional **RoadRally** Steward, or course instructor is not required for the renewal of a current RoadRally Safety Steward license.

INITIAL LICENSE

Requires Regional Executive OR **RoadRally** Board member OR Divisional **RoadRally** Steward, AND Safety Seminar signatures. Contact one of the above individuals for information regarding a Safety Steward Seminar.

Official's Signature	Date
Signer's Title	
Course Instructor Signature	Date

I, the undersigned, hereby made application to the SCCA, Inc., for the issuance of a **RoadRally** Safety Steward license (RRSS). I hereby certify that the information given above is true and correct. I further certify that I have attended a RRSS Seminar and that I am familiar with the SCCA Regulations governing the use of the RRSS License and I agree to abide by those Rules and Regulations and all applicable SCCA policies.

Applicant's Signature	Date
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***Please note that all SCCA licenses expire with membership.**

Please maintain a copy for your records and send the original form to:
 Central Licensing, P.O. Box 19400, Topeka, KS 66619-0400
 Phone: (800) 770-2055 or (785) 357-7222 / Fax: (785) 232-7228
 www.scca.org