

CRS Membership Form

We welcome your interest in joining the California Rally Series. Print out this form and mail it with a check for the appropriate amount to either:

**California Rally Series,
c/o Stage Rally Membership Liaison,
Christine Wittish
409 Verano Place
Irvine, CA 92617**

**(949) 680-9635
cwittish@mail.com**

**California Rally Series,
c/o Rallycross Membership Liaison,
Lorelei Brose
107 Fair Oaks Ave #330
Pasadena, CA 92504**

**(951) 907-2032
lorelei@sighren.com**

CRS COMPETITOR MEMBERSHIP All competitors who wish to receive CRS championship points are required to be members, which costs \$45 a calendar year. CRS membership includes a year's subscription to Dusty Times, inclusion in the CRS championships (Rally, RallySprint and RallyCross), membership card, CRS rulebook, 2 CRS decals, and mailings from various events. The rest of the membership fee goes to yearend awards, and maintaining a supply of equipment used to support those who organize events. Competitors will begin accruing CRS championship points only after paying their annual membership fee. Competitors who already receive Dusty Times or do not wish to receive it may pay \$30 for a competitor membership with no subscription.

CRS ASSOCIATE MEMBER The associate membership has been created for workers or other interested people who want to keep up on rally activities but will not be competing. Associate members receive all of the benefits described above (decals, rulebook, Dusty Times, mailings) but they are not eligible to compete in CRS events for championship points. The fee for joining the CRS as an associate member is \$25 per calendar year. If an associate member should decide at a later date to become a competitor he/she may change status by merely paying the \$20 difference. If they do not wish to receive Dusty Times the associate membership fee is \$10.

Please check one below:

COMPETITOR Membership with Dusty Times magazine	\$45
COMPETITOR Membership	\$30
ASSOCIATE Membership with Dusty Times magazine	\$25
ASSOCIATE Membership	\$10

(PLEASE PRINT CLEARLY)

NAME _____

STREET ADDRESS _____

CITY, STATE, ZIP _____

HOME PHONE _____

ALT. PHONE _____

EMAIL ADDRESS _____ OK to publish? Yes No

TEAM WEBSITE _____

CRS Membership Receipt

Name _____ Event or Date: _____

Amount \$ _____ Paid by: Cash Check (# _____) Money Order (# _____)

Agent Signature _____ Print _____