

WCC presents "Talk Like A Pirate Rallies" Saturday-September 19, 2020



Sanction #'s MW-075-001, 002, 003, 004, 005 Events: 3 Gimmick, 2 Poker Rally

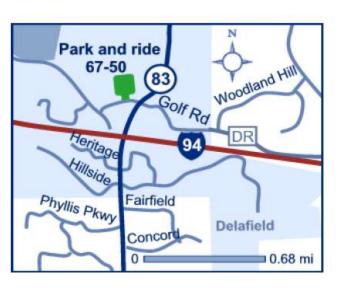
Date: September 19, 2020

Registration/Tech: 1100 Host Club: Wisconsin Corvette Club (MW-075)

Participant Meeting: 1145 Region: Midwest

First Car Out: 1230 Fee: Pre-Registered \$35.00 (September 12th Deadline) Day of \$40.00

Location: Nagawaukee Park & Ride—Hwy 83 & I-94---Delafield, WI 53018



Start

Nagawaukee Park & Ride Hwy 83 & I-94 (Wisconsin)

Delafield, WI 53018

Directions

- I-94, exit 287
- North on WIS 83
- · West (left) on Golf Road

MW-075-001 Gimmick, 002 Gimmick, 003 Gimmick, 004 Poker, 005 Poker

Chair: Mike Thate Oak Creek, WI 53154 Home: 414-762-2287

Cell: 414-530-0243 E-mail: <u>cthate@wi.rr.com</u>

Best Contact

WCC Governor: Ed Cassel Greendale, WI 53129

E-mail: Ecassll@wi.rr.com

Other Chairs announced at event



CORVETTE CLUB

THREE GIMMICK RALLYS & TWO POKER RALLYS
MW-075-001, MW-075-002, MW-075-003, MW-075-004, MW-075-005
Make checks payable to Wisconsin Corvette Club & mail in time to be received by September 12, 2020 to receive Pre-registration prices:

Rose Schmitt~3701 S 92nd St.~ Milwaukee. WI 53228

Car #_____ (Registration use only) FNTRY FFF: PRF-RFGISTRATION □ \$35.00 □ CASH ☐ CHECK # ENTRY FEE: DAY of EVENT □ \$40.00 □ CASH □ CHECK # Car Year & Make: ____ State: _____ Car License # Driver's License# Current NCCC card Driver

Checked Navigator 🗖 Checked Driver: _____ NCCC #: _____ Address: Club Name: City:_____ State: ___ Zip:___ Phone: (___) NCCC#: Navigator: Club Name: Address: City: _____ State: ___ Zip: ___ Phone: (___) ____ Whom do you wish to notify in case of Emergency? (leave blank if a member of your Club, at the event, will act As your contact person) Name: _____ Phone: (____) ____ TECH INSPECTION: HEADLIGHTS WINDSHIELD WIPERS ____ TURN SIGNALS STEERING ____TAIL LIGHTS SEAT BELTS _____ BRAKE LIGHTS ____ REAR VIEW MIRROR BACK-UP LIGHTS HORN _____ BRAKES _____ VALID DRIVER'S LICENSE ____ TIRES 2/32 inch tread _____ CURRENT VEHICLE LICENSE PLATE WORKING ODOMETER TECH INSPECTOR'S INITIALS:

Postmark Date: Date Received: Check#: Total of Check: