



# Vintage Chevrolet Club of America



## 10.4 T SANCTIONED TOUR REQUEST FORM

Please complete this form, save it and send to your **Area Director** for approval. See your **G&D** or go to **VCCA.org** to find your Area Director.

**Current Date** (MON/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_ (sample JUL/15/2016)

**Tour Master Requesting Approval:** \_\_\_\_\_ **VCCA #** \_\_\_\_\_  
(This is the person hosting the tour or responsible for the tour)

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State/ (Province)** \_\_\_\_\_ **Zip/ (Country)** \_\_\_\_\_

**Phone** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Area #** \_\_\_\_\_ **Region** (if applicable): \_\_\_\_\_

### TOUR INFORMATION

**TOUR TITLE:** \_\_\_\_\_  
(Use this same tour title when entering in a Touring Passport)

**OFFICIAL TOUR MILES** (no 10ths): \_\_\_\_\_ (Enter zero if mileage is to be determined. Please contact the Area Director after the tour with the total tour mileage.)

**TOUR DESCRIPTION:** \_\_\_\_\_

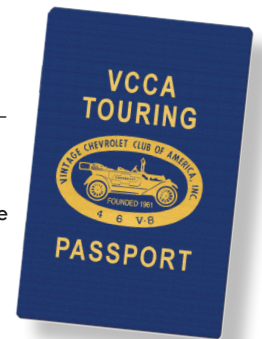
**City** \_\_\_\_\_ **State/ (Province)** \_\_\_\_\_ **Country** \_\_\_\_\_

**Date(s) of Tour** (MON/DD/YYYY): \_\_\_\_\_ **Begin:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **End:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Tour Restrictions:** \_\_\_\_\_  
(i.e. 6 Cylinder Tour 1929 to1954. If none leave blank)

**Will this tour be published in the G&D Event Calendar?** Check one: **Yes** \_\_\_\_ [see below] **No** \_\_\_\_

See your **G&D** for additional information about submitting information. Note: **G&D** deadlines are on the 15<sup>th</sup> of each month, **a minimum of 6 weeks prior to issue date**. The applicant is responsible for sending all calendar listings and tour display advertising (include any restrictions and the registration deadline) to the Editor. The deadline for tour articles to be published in the **G&D** is 3 months after the end of the tour. Send your article and photos to the **G&D** Editor!



DO NOT FILL IN THIS BOX - This is for the Area Director's use only.

**Area Director:** \_\_\_\_\_ **VCCA #** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(signature-electronic signature is acceptable) MON DD YYYY

The Area Director will acknowledge (to the applicant) receipt of this 10.4T form and forward a copy to the Touring Committee Chairperson. Additionally, (if the tour will be published in the G&D), then forward a copy to the G&D Chairperson.