



Silverstone (national) 13-14 April 2024

OFFICE USE ONLY

Amount Received:

Method of Payment:

Date of Payment:

The meeting will be held under the General Regulations of Motorsport UK (incorporating the provisions of the International Sporting Code of the FIA), including Covid-19 specific guidelines and the Supplementary Regulations and any written instructions the organising Club may issue for the event.

1. Driver De	tails Separate form r	equired for EACH CAR a	and EACH DRIVER
Single Driver	Two Driver Team (second driver must also fill out an entry form)	Name of team mate	
Driver Name		Driver Contac	t No.
Driver Address			Post Code
Email Address			
Licence No.	Licence Gra	de	Transponder No.
Please note that competitors holding	a licence not issued by Motorsport UK can only p	participate with written authorisation from their AS	N (article 2.3.7 FIA International Sporting Code)
Is this your first ever		Membership No. n merch box lanyard	
Are you taking medic	cation that the Chief Medica	al Officer should be aware o	f? Y N
If yes, list medication	n details		
DRIVER 1			
Emergency Contact Name		Emergency Co No.	ontact
Emergency Contact Address			Post Code
			(Please make sure they are aware that their details have been given.)
DRIVER 2 (IF APPLIC	CABLE)		
Emergency Contact Name		Emergency Co No.	ontact
Emergency Contact Address			Post Code
			(Please make sure they are aware that their details have been given.)



Race	Session	Duration	Cost	X to enter			
Round 1 - Silverstone National	Saturday (Qualifying)	20 mins	£580				
Round 1 - Silverstone National	Saturday (Race 1)	20 mins					
Round 1 - Silverstone National	Sunday (Race 2)	20 mins					
Food	Session	No. of Peopl	le Cost	X to enter			
BBQ night - price PP and in advance 1 x Pass per driver included	Saturday Evening		£10				
3. Registered Car Details Separate	e form required for EACH CAR and E A	ACH DRIVER					
Make and Model		Race No.					
Sponsors							
4. Signature Confirms you agree with the event S	Supplementary Regulations and authori	se payment of the	correct entry fe	ee.			
Driver Signature		Date					
5. Payment Details No entry will be acce	epted unless accompanied by the corre	ct entry fee.					
BACS Payment Bernie's V8s and Historic Outlaws Ltd. Sort Code 2	20-03-84 Account Number 2	2368 8437					
Payment by Credit/Debit Card Tick this box if you wish to pay via credit/debit card and BV8 will email you a secure link to follow							
*Any entries received after the closing date will incur an additional £30 fee. Refunds	are payable back to the original source. Sorry, we no	o longer accept payment	by cheque.				
6. Entrant Details Only applicable if you ha	ave a Motorsport UK Teams Entrant Lic	ence					
Entrant Name on Licence	Entrant Licence	No.					
Entrant Address		Post Code					
Representative Name	Contact Numbe	r					
Email Address							
Entrant Signature		Date					



2. Race Entry Closing date for entries is MONDAY 8 APRIL 2024