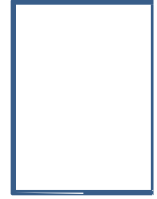


ENTRY FORM
BRIGHTON & HOVE MOTOR CLUB LTD
The Eagle Summer Sprint 2024
Goodwood Motor Circuit West Sussex
Saturday 3rd August 2024



Motorsport UK Permit number – **Interclub 136554**

Held under the General Regulations of Motorsport UK (incorporating the provisions of the International Sporting Code of the FIA) and Supplementary Regulations.

A separate Entry Form must be completed for each entry.

Please enter on line or complete this form (BLOCK Capitals) and send it together with the correct fee to

Mrs Margaret Watts

22, Fry Crescent, Burgess Hill, West Sussex, RH15 8TP

bhmc.entries@btinternet.com

07843 136006 (not after 9pm)

An incomplete entry form may result in refusal of entry.

No Electric vehicles will be accepted at this event

Payment via Bank Transfer preferred

Brighton and Hove Motor Club

Account 10183903 Sort Code 40-25-03

Reference: EAG then Surname

Paypal through the website or Cheques

should be made payable to

BRIGHTON & HOVE MOTOR CLUB LTD

Entry Fee - £150

Entries close at midnight on Friday 19th July 2024

ENTRANT

Title:-	Forename:-	Surname:-
Address		
Post Code		
Tel No / Mob No		
Email:		
Motorsport UK Licence - Type / Grade / Number		

DRIVER

Title:-	Forename:-	Surname:-
Tel No / Mob No		
Email:		
Motorsport UK Licence - Type / Grade / Number		

CAR

Is the car a hybrid car, Yes/No.	Yes / No
Make / Model	
Make of Engine / CC	
Is the car supercharged or turbocharged	
Fuel used	
Name of Club / Membership No:	
If any other driver is sharing, state name:	

CLASS ENTERED

Class -Classes are as per the General Regulations (S10.1) 2024

Is the car V8 powered	Yes / No
Is the car powered by a Motorcycle engine	Yes / No

If an entrant or driver is under 18 this form must be countersigned by the parent or Guardian

Title:-	Forename:-	Surname:-
Relationship to Entrant / Driver		
Address and Post Code		
Tel No / Mob No		
Email:		

Note: *Where the Parent/Guardian/Guarantor is not present there must be a representative who must produce a written and signed authorisation to so act from the Parent/Guardian/Guarantor appropriate*

Name of person to be notified in the event of an incident

Title:-	Forename:-	Surname:-
Address and Post Code		
Tel No / Mob No		Email
Relationship		

Signature of Entrant	Date
Signature of Driver	Date
Comments	
OFFICE USE ONLY	
Entry Fee Received - Yes / No	

