

2022 Dunlop Mini Seven & Miglia Championship

PLEASE WRITE IN BLOCK CAPITALS AND COMPLETE ALL SECTIONS



SECTION 1 – DRIVER DETAILS

Driver Name

Driver Address

Licence Grade Licence No ASN

Date of Birth Home Town

Phone: Home Work Mobile

Email Address

Please indicate below any prescribed drugs or conditions which should be notified to the Medical Team

SECTION 2 – VEHICLE DETAILS

Car Number

Make of Car

Type/Model cc

Transponder No Class Year

Sponsor Details

SECTION 3 – EVENT DETAILS

		Entry Fee	Entering		
April 16 th & 17 th	Snetterton 300	£400	<input type="text"/>	<input type="text"/>	Closing Date: Friday April 1st
May 21 st & 22 nd	Cadwell Park	£395	<input type="text"/>	<input type="text"/>	Closing Date: Friday May 6 th
June 11 th & 12 th	Castle Combe	£420	<input type="text"/>	<input type="text"/>	Closing Date: Friday May 27 th
July 9 th & 10 th	Donington Park	£420	<input type="text"/>	<input type="text"/>	Closing Date: Friday June 24 th
Aug 6 th & 7 th	Brands Mini Festival	£395	<input type="text"/>	<input type="text"/>	Closing Date: Friday July 22 nd
Oct 15 th & 16 th	Silverstone Int	£450	<input type="text"/>	<input type="text"/>	Closing Date: Friday Sept 30 th
Nov 5 th & 6 th	Brands Trucks	£450	<input type="text"/>	<input type="text"/>	Closing Date: Friday Oct 21 st

Name and Address of Relative to be Notified in the Event of a Serious Accident

Name Relationship Telephone

Address

I declare that:

1. I have been given an opportunity to read the General Regulations of the Motor Sports Association and, if any, the Supplementary Regulations for this event and agree to be bound by them. I declare that I am physically and mentally fit and competent to take part in the event. I understand that motorsport is dangerous and accidents causing death, injury, disability and property damage can and do happen. I understand that these risks may give rise to my suffering personal injury or other loss and I acknowledge and accept these risks. 2. To the best of my belief the driver(s) possess (e's) the standard of competence necessary for an event of the type to which this entry relates and that the vehicle entered is suitable and roadworthy for the event having regard to the course and the speeds which will be reached. 3. The use of the vehicle hereby entered is covered by insurance as required by the law which is valid for such part of this event as shall take place on roads as defined by the law. 4. I understand that should I at the time of this event be suffering from any disability whether permanent or temporary which is likely to affect prejudicially my normal control of the vehicle, I may not take part unless I have declared such disability to the ASN which has, following such declaration, issued a licence which permits me to do so. 5. Any application form for a Licence which was signed by a person under the age of 18 years was countersigned by that person's parent/legal guardian/guarantor, whose full names and addresses have been given. 6. If I am the Parent/Guardian/Guarantor of the driver I understand that I shall have the right to be present during any procedure being carried out under the Supplementary Regulations issued for this event and the General Regulations of the MSA. As the Parent/Guardian/Guarantor I confirm that I have acquainted myself with the MSA General Regulations, agree to pay any appropriate charges and fees pursuant to those Regulations (to include any appendices thereto) and hereby agree to be bound by those Regulations and submit myself without reserve to the consequences resulting from those Regulations (and any subsequent alteration thereof). Further, I agree to pay as liquidated damages any fines imposed upon me up to the maxima set out in Part 3, Appendix 1. **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 as appropriate.** 7. I hereby agree to abide by the MSA Child Protection Policy and Guidelines and the National Sporting Code of Conduct. 8. I undertake that at the time of the event to which this entry relates I shall have passed or am except from an ASN specified medical examination within the specified period. (H10.1.6) 9. I have read and fully understood the Procedure for Control of Drugs and Alcohol as contained in the MSA Yearbook Regulations H39, D35.1, G15.1.4 and have also fully familiarised myself with the information on the web sites referred to (www.ukad.org.uk and www.wada-ama.org) in particular the UK Anti-Doping Rules which have been adopted by the MSA (as amended). Further, if I am counter-signing as the Parent or Guardian of a minor then in addition to the deemed consent to the testing of that minor (Art 5.6.2) I hereby confirm that I give such consent for the minor concerned to be so tested. **Indemnity:** In consideration of the acceptance of this entry I agree that neither any one of or any combination of the MSA and its associated clubs, the organisers, the land owners or other occupiers, the promoters and their respective officers, servants, representatives and agents (the "Parties") shall have any liability for loss or damage which may be sustained or incurred by me as a result of participation in this event. Nothing in this clause is intended to or shall be deemed to exclude or limit liability for death or personal injury. To the fullest extent permitted by law I agree to indemnify and hold harmless each of the Parties in respect of any loss or damage whatsoever and howsoever arising from my participation in this event.

Driver Signature Date

Age if Under 18 Any indemnity and/or declaration as described by the paragraphs above which is signed by a person under the age of 18 shall be countersigned by that person's parents or guardian, whose full name & address is below

Name of Parent/Guardian Signature of Parent/Guardian

Full Address

SECTION 3 – PAYMENT DETAILS

By Bank Transfer Mini 7 Racing Club: Sort Code: 30-92-82 Account No: 00004822

By Cheque: Payable to: Mini 7 Racing Club, and to be sent to Colin Peacock. We cannot accept Paypal or credit cards.

Please scan and email completed form to Colin Peacock(colinmpeacock@hotmail.co.uk) or via post to Colin Peacock, 47, Redston Road, London, N87HL