

# 2025 Goodyear Mini Seven & Miglia Championship



PLEASE WRITE IN BLOCK CAPITALS AND COMPLETE ALL SECTIONS

## SECTION 1 – DRIVER DETAILS

Driver Name	<input style="width: 95%;" type="text"/>		
Driver Address	<input style="width: 95%;" type="text"/>		
Licence Grade	<input style="width: 25%;" type="text"/>	Licence No	<input style="width: 25%;" type="text"/>
		ASN	<input style="width: 25%;" type="text"/>
Date of Birth	<input style="width: 25%;" type="text"/>	Home Town	<input style="width: 50%;" type="text"/>
Phone: Home	<input style="width: 30%;" type="text"/>	Work	<input style="width: 30%;" type="text"/>
		Mobile	<input style="width: 30%;" type="text"/>
Email Address	<input style="width: 95%;" type="text"/>		

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

## SECTION 2 – VEHICLE DETAILS

<b>Car Number</b>	<input style="width: 95%;" type="text"/>	Make of Car	<input style="width: 65%;" type="text"/>
		Type/Model	<input style="width: 65%;" type="text"/>
		cc	<input style="width: 25%;" type="text"/>
Transponder No	<input style="width: 25%;" type="text"/>	Class	<input style="width: 25%;" type="text"/>
		Year	<input style="width: 25%;" type="text"/>
Sponsor Details	<input style="width: 95%;" type="text"/>		

## SECTION 3 – EVENT DETAILS

Date	Circuit	Entry Fee	Tick	Entry Form to:	Payment to:
5 <sup>th</sup> /6 April	Snetterton 300	£495		colinmpeacock@hotmail.co.uk	BACs / Cheques to Mini 7 Racing Club
3 <sup>rd</sup> / 4 <sup>th</sup> May	Brands GP	£495		colinmpeacock@hotmail.co.uk	BACs / Cheques to Mini 7 Racing Club
7 <sup>th</sup> / 8 <sup>th</sup> June	Silverstone GP	£495		<a href="mailto:colinmpeacock@hotmail.co.uk">colinmpeacock@hotmail.co.uk</a>	BACs / Cheques to Mini 7 Racing Club
11 <sup>th</sup> /12 <sup>th</sup> /13 <sup>th</sup> July	Zandvoort	£495		colinmpeacock@hotmail.co.uk	BACs / Cheques to Mini 7 Racing Club
2 <sup>nd</sup> / 3 <sup>rd</sup> August	Brands Indy	£495		<a href="mailto:colinmpeacock@hotmail.co.uk">colinmpeacock@hotmail.co.uk</a>	BACs / Cheques to Mini 7 Racing Club
6 <sup>th</sup> / 7 <sup>th</sup> September	Croft	£495		<a href="mailto:colinmpeacock@hotmail.co.uk">colinmpeacock@hotmail.co.uk</a>	BACs / Cheques to Mini 7 Racing Club
20 <sup>th</sup> / 21 <sup>st</sup> September	Castle Combe	£495		<a href="mailto:colinmpeacock@hotmail.co.uk">colinmpeacock@hotmail.co.uk</a>	BACs / Cheques to Mini 7 Racing Club
11 <sup>th</sup> / 12 <sup>th</sup> October	Silverstone Int	£495		<a href="mailto:colinmpeacock@hotmail.co.uk">colinmpeacock@hotmail.co.uk</a>	BACs / Cheques to Mini 7 Racing Club

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. No Paypal or credit cards.

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

Name	<input style="width: 95%;" type="text"/>	Relationship	<input style="width: 95%;" type="text"/>	Telephone	<input style="width: 85%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>				

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](http://www.ukad.org.uk) and [www.wada-ama.org](http://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	<input style="width: 95%;" type="text"/>	Date	<input style="width: 95%;" type="text"/>
Age if Under 18	<input style="width: 25%;" type="text"/>	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	<input style="width: 30%;" type="text"/>	Signature of Parent/Guardian	<input style="width: 30%;" type="text"/>
Full Address	<input style="width: 95%;" type="text"/>		