

For Office Use

AFFIX DRIVER
PHOTOGRAPH



For Official Use Only

Drivers Name: _____
Race Car No: _____
Formula(s): _____
Insurance: **STANDARD**
Amount Paid £ _____ (CHQ/CHS/C/C)
Date paid : ____/____/____
Received Payment at _____
Date licence issued: ____/____/____

**Please fully complete this licence/contract application form, and mail it back to the address below.
Please ensure that your payment and photos are enclosed.**

MILDENHALL STADIUM LTD
Spedeworth House, Hollybush Industrial Park
Hollybush Lane, Aldershot,
Hants, GU11 2PX
Tel. 01252 322920
Email: info@spedeworth.co.uk

MILDENHALL STADIUM DRIVERS RACING CONTRACT 2017

THIS AGREEMENT is made between Mildenhall Stadium Ltd after referred to as MILDENHALL AND

(FULL) NAME : _____

Date of Application : _____ day of _____ 2016/17
(day) (month)

This Contract will terminate on the 31st December 2017 unless terminated sooner in accordance with the terms of this contract.

Application to race a (State Formula):-

I, the undersigned, apply to MILDENHALL to race on their controlled racing circuits (as listed herein) ('Circuits'). In consideration I therefore agree as follows:

1. I have been provided with a copy of and have read this agreement and the MILDENHALL Rules & Regulations and understood them and agree to abide by the Rules and conditions set out below.
2. I am over 16 but not over 64 years of age (if you are over 16 but under 18 years of age you will need a parental consent form to accompany this licence). Note: If you are over 64 and under 70 you will need to provide a Full Drivers licence and a Medical Certificate.
3. I fully understand the nature and type of racing in which I wish to participate and I am also fully familiar with the nature, layout, features and geography of the Circuits upon which I wish to race.
4. I am satisfied that the Circuits are safe for me to race upon and that should I at any time have any doubts as to their safety I am entitled to decline to race thereon, and that I may inspect each Circuit prior to racing there upon.

5. Not to take part, as a person or allow my competition car, my name or racing number to be used with any other promotion advertising, at any time within the dates of this agreement, other than with MILDENHALL or promotions advertising affiliated organisations, or without written permission of MILDENHALL.
6. I agree to abide by the rules as laid down by MILDENHALL [and it's Board of Control].
7. I hereby give MILDENHALL the right to use my name or my racing number, and any photographs or video footage of me and or my race car, or similar for the purpose of advertising or publicity as they see fit.
- 8.1 I will pay MILDENHALL on the signing of this agreement the appropriate fee set out below:
 - 8.1.1 £75.00 inc. VAT (All New Drivers); or
 - 8.1.2 £60.00 inc VAT for 2016 drivers renewing before December 31st 2016 - this payment is in part towards Drivers personal accident insurance costs.
- 8.2 MILDENHALL will on acceptance of this agreement supply me with a Driving (Racing) Licence (aka log book), and Number (exclusive to myself for the period of this agreement), one printed Rulebook for 2017 and notification of my racing grade and the opportunity to race according to the rules set out in the Rule Book. I understand that it is my responsibility to ensure that I receive a copy of the 2017 rules and regulations.
9. I understand that any Sponsorship, Advertising rights or Benefits I might receive from the same, must have the prior written approval of MILDENHALL.
10. I understand that any injury sustained by me during racing on MILDENHALL controlled tracks will only entitle me to a personal accident cover as set out in the Rule Book.
11. Not to cause, or be a part of in any way involved with any action that would or could disrupt a race meeting. I also understand that I am responsible for the actions of my pit crew and family members, and acknowledge that if their behaviour in any way disrupts a race meeting; my license may be suspended or in some circumstance, cancelled.
12. That except in the case of death or personal injury caused by Mildenhall's negligence, or as expressly provided in this Contract, Mildenhall shall not be liable to me by reason of any representation (unless fraudulent), or any implied warranty, condition or other term, or any duty at common law, or under the express terms of the Contract, for any loss of profit or any indirect, special or consequential loss, damage, costs, expenses or other claims (whether caused by the negligence of Mildenhall, its servants or agents or otherwise) which arise out of or in connection with the provision by Mildenhall of this Contract and the right to race at the Circuits or the use of the Circuits by me, and the entire liability of Mildenhall under or in connection with the Contract shall not exceed the amount of Mildenhall's charges pursuant to the Contract.
13. Either I or Mildenhall may (without limiting any other remedy) at any time terminate the Contract by giving written notice to the other if the other commits any material breach of the Contract and, if such breach is capable of remedy) fails to remedy the breach within 30 days after being required by written notice to do so, or if the other goes into liquidation, becomes bankrupt, makes a voluntary arrangement with its creditors, or has a receiver or administrator appointed.
- 14.1 This Contract constitutes the entire agreement between us and supersedes any previous agreement or understanding and may not be varied except in writing between myself and Mildenhall.
- 14.2 English law shall apply to this Contract and both I and Mildenhall agree to submit to the exclusive jurisdiction of the English Courts.

We advise you to take a copy of this license for your own records, before returning it for processing.

The Company reserves absolute right to take whatever action to disqualification as deemed to be necessary.

MEDICAL QUESTIONNAIRE – MUST BE COMPLETED

I hereby warrant the following answers are true and each warranty is repeated and continues to be true throughout the term of this agreement in respect of my medical condition.

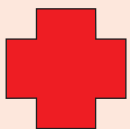
Please put a 'X' next to the right answer

- (a) Do you suffer from Epilepsy or sudden attacks of disabling giddiness? **YES** **NO**
- (b) Are you suffering from any defect in movement or muscular power? **YES** **NO**
- (c) Are you suffering from any disease, medical condition mental or physical, or disability which may cause the driving by you in a competition to be a source of danger to yourself and to others? **YES** **NO**
- (d) Do you suffer from any back problems, which have caused, you to visit a Doctor within the last 12 months? **YES** **NO**

If the answer is yes to any of the above medical questions A DOCTORS LETTER WILL BE REQUIRED, prior to a racing licence being granted.

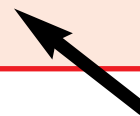
In order to process any insurance claim form we need to obtain the Incident Report Form.

Please sign here to authorise MILDENHALL to obtain this on your behalf.



Name : _____ **Date :** ____ / ____ / ____

Signature: _____



Sign Here

All contracts should be fully completed, signed and mailed with 2 x photographs and payment to the office address as detailed on the front page of this contract.

(1) Previous racing history:

	Race No.	Formula	Date from /To (year)	Promotion	Highest Grade
a.	_____	_____	_____ to _____	_____	_____
b.	_____	_____	_____ to _____	_____	_____
c.	_____	_____	_____ to _____	_____	_____
d.	_____	_____	_____ to _____	_____	_____

(please continue on a separate sheet if needed)

(2) DISCLOSURE OF PREVIOUS OR CURRENT RACING SUSPENSION OR BAN

Are you currently under a suspension or ban from racing?

YES NO

Have you been suspended or banned from racing by Mildenhall or any other promotion in or out of the ORCi?

YES NO

If the answer is yes to either of the above please give details

(please continue on a separate sheet if needed)

(3) Formula(s) to be raced according to this application:

1) _____	Racing Number Requested _____
2) _____	Racing Number Requested _____
3) _____	Racing Number Requested _____

(Please note there is an additional charge if you wish to race more than one formula - see contract notes – item 3).

DRIVERS FULL NAME (Block Caps) _____

DRIVERS DATE OF BIRTH: ____/____/____

AGE AT LAST BIRTHDAY:

ADDRESS (Block Caps): _____

Postcode _____

Home Tel No: _____ Work Tel No: _____

Mobile Tel No: _____ Email address: _____

May we give your telephone numbers out to other registered drivers?

Work telephone number	YES/NO	(delete where applicable)
Home telephone number	YES/NO	(delete where applicable)
Mobile telephone number	YES/NO	(delete where applicable)
Email address	YES/NO	(delete where applicable)

SIGNED BY APPLYING DRIVER: _____



Sign Here

PLEASE LIST YOUR SPONSORS DETAILS: (please continue on a separate sheet if needed)

1) NAME: _____	2) NAME: _____
ADD: _____	ADD: _____
_____	_____
_____	_____

Signed for and on behalf of MILDENHALL:

RACING OFFICIAL: _____

PRINT NAME: _____

OFFICE USE ONLY

DRIVERS CONTRACT NOTES

PLEASE READ THESE NOTES VERY CAREFULLY BEFORE COMPLETING YOUR CONTRACT

- 1) This contract must be filled in correctly in INK, in every respect and must be accompanied by payment of £75.00 (£60 for renewals as Page 2, Paragraph 8.1), Please print clearly your NAME, ADDRESS with POSTCODE AND CONTACT TELEPHONE NUMBERS, as this has to be copied on all communications. You must also notify us in writing of any change of address, telephone number or name immediately. You must also advise us immediately if your medical condition changes from the statement you have made herein.
- 2) 2 x recent passport size colour photographs of you must accompany this agreement. **Please print your name clearly on the back of each photo.**
- 3) Drivers wishing to compete in more than one formula may do so by indicating formulas required on Page 4. The above £75.00/£60.00 should be increased by £15.00 for each additional formula required. The formulas requested will be endorsed on your competition licence. Please ensure this is correct when you receive it.
- 4) Incomplete application forms will be returned.

Please apply to **MILDENHALL** (at the address detailed on page one of this form) for the appropriate application form.

Credit Card Payments	
Card Number:	
_____ / _____ / _____ / _____	
(Min 16 digits)	
Expiry Date. _____ / _____	
Valid from. _____ / _____	
Security Code (Last 3 digits) _____	
Issue No (if applicable) _____	
Amount to be debited £ _____	
Cardholders signature :	

Please make cheques payable to:

Mildenhall Stadium Ltd

All New Drivers	£75	
2016 Renewing Drivers <small>Contract price (before end of Dec 2016)</small>	£60	
2016 Renewing Drivers <small>Contract price (after Dec 2016)</small>	£75	
Each additional formula	£15	
Total amount enclosed		

ALL CONTRACTS MUST BE RETURNED TO THE ADDRESS DETAILED ON PAGE 1

