MCDL All-Star Meet
Entry and Scoring Form

DIVING ORDER:

Name:			Meet Date:		Event Number:
Club:	Division:		Diver's Date of Birth:		Age Group:
Coach:			Meet Location:		BOYS GIRLS Circle One

Order:	Dive No.:	Dive Name:	Posit:	DD:	JUDGES' SCORES: 1	2	3	4	5	6	7	Net Total:
1												
2												
3												
4												
5												
6												

AWARD:

			.		1
			.		2
			.		S
			.		3
			.		S
			.		4
			.		S
			.		5
			.		S
			.		6
			.		TOTAL

PLACE:

Waiver:

In consideration of acceptance of this application, I hereby for my heirs, executors, and administrators, waive and release any and all rights and claims for damage I have against Montgomery County Diving League, the _____ pool, their agents, representatives, successors, or assigns for any and all injuries suffered by me in connection with my competition in the MCDL All-Star Meet.

Diver's Signature Date

Parent's Signature Date
(must sign if diver is a minor)

Original: Diver ■ Please mail the Copy to MCDL Records