



RACKING HORSE BREEDERS' ASSOCIATION OF AMERICA

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HEADQUARTERS
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JUDGE EVALUATION

Date: _____

Name of JUDGE: _____

Name of SHOW: _____

Date of Show: _____

Instructions: PLEASE MARK WITH AN X THE RATING YOU WISH TO ASSIGN IN EACH CATEGORY. If you are unsure about a category, please leave it blank.

	EXCELLENT	GOOD	AVERAGE	BELOW AVERAGE	POOR
JUDGE'S APPEARANCE	_____	_____	_____	_____	_____
ABILITY TO CALL A CLASS	_____	_____	_____	_____	_____
ABILITY TO TIE CLASS	_____	_____	_____	_____	_____
JUDGE'S BEHAVIOR	_____	_____	_____	_____	_____
JUDGE'S RULES ENFORCEMENT	_____	_____	_____	_____	_____
JUDGE'S CONSISTENCY	_____	_____	_____	_____	_____

Are you an EXHIBITOR, TRAINER, or OWNER? _____

WOULD YOU RECOMMEND THIS JUDGE FOR FUTURE SHOWS? YES ___ NO ___ Uncertain ___

RULE DEVIATIONS:

CLASSES POORLY TIED:

OVERALL PERFORMANCE:

NAME OF EVALUATOR: _____ Phone: (____) ____ - ____
 Please Print

Signature of Evaluator: _____

MUST BE SIGNED