

**OHIO 4-H HORSE SHOW EVALUATION  
CONFIDENTIAL**

(To be completed by the contracted judge only)

Name of Show: \_\_\_\_\_ Date of Show: \_\_\_\_\_

Show County: \_\_\_\_\_ State: \_\_\_\_\_

Name of Show Manager/Contact Person: \_\_\_\_\_

Address of Show Manager/Contact Person: \_\_\_\_\_  
City/Town State Zip

Show Start Time: \_\_\_\_\_ am or pm Show Ending Time: \_\_\_\_\_ am or pm

**Evaluation of the Horse Show (circle the answer most appropriate for each question).**

	1-Poor		3-Fair		5- Average		8-Good		10-Excellent		Unknown
<b>Management</b>											
Knowledge of Ohio 4-H rules	1	2	3	4	5	6	7	8	9	10	NA
Ability to run show	1	2	3	4	5	6	7	8	9	10	NA
Organization	1	2	3	4	5	6	7	8	9	10	NA
Courtesy and professionalism	1	2	3	4	5	6	7	8	9	10	NA
Travel arrangements (meals, room, transportation)	1	2	3	4	5	6	7	8	9	10	NA
<b>Ring Steward (if applicable)</b>											
Knowledge of Ohio 4-H rules	1	2	3	4	5	6	7	8	9	10	NA
Ability to run show	1	2	3	4	5	6	7	8	9	10	NA
Organization	1	2	3	4	5	6	7	8	9	10	NA
Courtesy and professionalism	1	2	3	4	5	6	7	8	9	10	NA
<b>Facilities</b>											
Quality of equipment for Trail, Jumping, Contesting, etc	1	2	3	4	5	6	7	8	9	10	NA
Quality of arena footing	1	2	3	4	5	6	7	8	9	10	NA
<b>Overall rating</b>	1	2	3	4	5	6	7	8	9	10	NA

Please explain any scores listed as "POOR" below in writing:

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Name of Judge: \_\_\_\_\_ Signature: \_\_\_\_\_

Address of Judge: \_\_\_\_\_  
City/Town State Zip

Telephone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Email): \_\_\_\_\_

Completed evaluation of the horse show(s) should be mailed by the judge within 30 days to:  
**Ohio 4-H Horse Show Evaluation, 222 Animal Sciences, 2029 Fyffe Ct, Columbus, OH 43210-1095**