



Horse Show Evaluation

OHJA encourages all parties involved in an approved show to submit an evaluation. This helps ensure that standards are being met and rules are being followed. **Unsigned forms will not be accepted.**

Show Name _____ **Show Date** _____

Show Location _____
city/state/zip stable/facility name

Judge _____

Check “Yes” or “No” to each question, and please provide details on any “No” answer below

1.	Did the show start on time?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.	Did the show run smoothly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.	Did the show follow OHJA rules?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.	Was management cooperative with exhibitors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5.	Was the secretary's office efficient?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6.	Were OHJA membership applications, show rules and show reports available to exhibitors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7.	Were courses properly constructed and rideable?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8.	Was the jump crew efficient?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9.	Were the ring(s) size and footing good quality?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.	Was the schooling area convenient and set with adequate fences?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11.	Were food and refreshments available when exhibitors arrived at the show?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12.	Were restroom facilities adequate and clean?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13.	Were the communications good between announcer, warm-up ring and barns?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14.	Was the paddock master efficient?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15.	Was stabling good, if available?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
16.	Was water convenient for the horses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17.	Were emergency facilities arranged for?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18.	Was there a blacksmith and veterinarian on call?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19.	Was judging done in accordance with OHJA rules?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
20.	Was the judge impartial and prompt?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Comments or Suggestions _____

Full Name _____ **Capacity** ☐ Exhibitor ☐ Spectator ☐ Judge
☐ Show Official ☐ OHJA Representative

Signature _____