

Combined Eastern Shore Horse Shows

Show Evaluation Form

We welcome your comments and opinions of the CESHS member shows.
Your input will assist with the improvement and continuation of the shows.

Please return the completed form to a CESHS officer.

Name of Show: _____ Date: _____

Please rate as follows:

E = Excellent

VG = Very Good

G = Good

F = Fair

P = Poor

N/A if did not apply

Additional comments, elaboration, or suggestions are welcome on the back of this form.

Timing:

Start time _____

Ran smoothly _____

Schedule conflicts _____

Finish time _____

Grounds:

Footing _____

Rings (size/condition) _____

Schooling area _____

Parking _____

Rest rooms _____

Trash cans _____

Water _____

Entry booth _____

Stabling _____

Communications:

Prize List _____

Directions to show _____

During the show _____

P.A. system _____

Food:

Location _____

Quality _____

Officials:

Office staff _____

Announcer _____

Gate keeper(s) _____

Ring master(s) _____

Jump Crew _____

Steward _____

Judge a. _____

b. _____

c. _____

Emergency response _____

Veterinarian _____

Farrier _____

Courses:

Jumps _____

Obstacles _____

Diagrams posted _____

Proper requirements _____

General:

Class offerings _____

Ribbons/prizes _____

Signature