



Virginia Horse Shows Association, Inc.

HORSE SHOW EVALUATION FORM

Name of Competition: _____

Date of Competition: _____

For all questions, please use the following rating scale:

1 = EXCELLENT 2 = GOOD 3 = SATISFACTORY 4 = UNSATISFACTORY

		EX	GD	SA	UN
1.	Quality of footing (<i>i.e., consistency, dust control, dragging, etc.</i>):				
	A. Show Rings	1	2	3	4
	B. Schooling Areas	1	2	3	4
	Comments: _____				
2.	Quality of schooling areas (<i>i.e., size, location, jumps</i>):	1	2	3	4
	Comments: _____				
3.	Timeliness of schedule:	1	2	3	4
	<i>If problem, cause was:</i>				
	A. Poor scheduling	1	2	3	4
	B. Exhibitor/trainer cooperation	1	2	3	4
	C. Gate personnel	1	2	3	4
	D. Management	1	2	3	4
	Comments: _____				
4.	Quality of stabling:				
	A. Permanent (<i>if applicable</i>)	1	2	3	4
	B. Temporary (<i>if applicable</i>)	1	2	3	4
	Comments: _____				
5.	Quality of courses and fences:	1	2	3	4
	Comments: _____				
6.	Organization and safety of schooling:				
	A. Before show:	1	2	3	4
	B. During show:	1	2	3	4
	Comments: _____				

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7. Courtesy, efficiency, professionalism and availability of:
- | | | | | |
|---------------------|---|---|---|---|
| A. Show management | 1 | 2 | 3 | 4 |
| B. Office personnel | 1 | 2 | 3 | 4 |
- Comments: _____
8. Food Service:
- | | | | | |
|-------------------------|---|---|---|---|
| A. Quality | 1 | 2 | 3 | 4 |
| B. Price | 1 | 2 | 3 | 4 |
| C. Availability of food | 1 | 2 | 3 | 4 |
- Comments: _____
9. Costs:
- | | | | | |
|---------------|---|---|---|---|
| A. Entry fees | 1 | 2 | 3 | 4 |
| B. Stall fees | 1 | 2 | 3 | 4 |
| C. Other fees | 1 | 2 | 3 | 4 |
- Comments: _____
10. Appropriateness of awards presentations
- | | | | | |
|--|---|---|---|---|
| | 1 | 2 | 3 | 4 |
|--|---|---|---|---|
- Comments: _____
11. Adequacy of communications between rings and barn area:
- | | | | | |
|--|---|---|---|---|
| | 1 | 2 | 3 | 4 |
|--|---|---|---|---|
- Comments: _____
12. Quality of facility:
- | | | | | |
|------------------|---|---|---|---|
| A. Camping space | 1 | 2 | 3 | 4 |
| B. Parking | 1 | 2 | 3 | 4 |
| C. Restrooms | 1 | 2 | 3 | 4 |
| D. Safety | 1 | 2 | 3 | 4 |
| E. Seating | 1 | 2 | 3 | 4 |
| F. Security | 1 | 2 | 3 | 4 |
| G. Stable area | 1 | 2 | 3 | 4 |
| H. Wash racks | 1 | 2 | 3 | 4 |
| I. Other: _____ | 1 | 2 | 3 | 4 |

Additional Comments: _____

Name (optional)

*** NOTE ***

Please return this form to The Virginia Horse Shows Association Office. It will be reviewed by the Show Evaluation Committee. The committee will notify shows of compliments and suggestions, on a confidential basis, to help shows be able to provide excellent services for all exhibitors and spectators.