

# NATIONAL WALKING HORSE ASSOCIATION -- POST SHOW REPORT FORM

*Please complete this form and return it along with the NWA class sheets and any funds due to:*

NATIONAL WALKING HORSE ASSOCIATION  
4059 Ironworks Pkwy, Suite 4  
Lexington, KY 40511

Name of Horse Show \_\_\_\_\_

Location of Horse Show \_\_\_\_\_

Date(s) of Horse Show \_\_\_\_\_

Show Manager's Name and Phone Number \_\_\_\_\_

Show Manager's Address \_\_\_\_\_

Entries: Number this year \_\_\_\_\_ Number last year \_\_\_\_\_ Comments: \_\_\_\_\_

Horses: Number this year \_\_\_\_\_ Number last year \_\_\_\_\_ Comments: \_\_\_\_\_

Total Fees Due: \_\_\_\_\_ (DQP Fees \_\_\_\_\_; Show Packet CD (\$5.00/each, if purchased) \_\_\_\_\_)

***On a scale of 1 to 10, with 10 being the best, please rate the following items. If additional space is needed for your comments, please use the back of this page.***

\_\_\_\_\_ How do you rate the National Walking Horse Association (NWA) DQP program? Comments: \_\_\_\_\_

\_\_\_\_\_ How do you rate the NWA judging? Comments: \_\_\_\_\_

\_\_\_\_\_ How do you rate the CD of show manager materials that was sent from the NWA? Comments: \_\_\_\_\_

\_\_\_\_\_ How do you rate the accessibility and help you received from the NWA staff? Comments: \_\_\_\_\_

Will you affiliate your show with the NWA next year? Yes No (please circle one) Comments: \_\_\_\_\_

What suggestions do you have to improve the NWA's affiliation program? \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_