



Guest Judge Application

Name of Show: _____

Date of Show: _____ Location of Show: _____

Name of Show Manager: _____

Contact Information for Show Manager: Home Phone: _____

Cell Phone: _____ Email: _____

Why are you requesting a Guest Judge for your show? _____


~~~~~Guest Judge Information~~~~~

Name of Guest Judge: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Years of Experience as a Judge: \_\_\_\_\_

Please list current Judges Card(s) held: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other Experience/Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name and Contact Information for 3 References for Guest Judge:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

Show Manager Signature: \_\_\_\_\_ Application Date: \_\_\_\_\_

**Send completed form along with \$100 fee to: National Walking Horse Association  
4059 Iron Works Parkway, Suite 4  
Lexington, KY 40511  
859-252-6942; 859-252-0640 (fax); [ExecDir7@nwha.com](mailto:ExecDir7@nwha.com)**