



Foundation for the Advancement and Support of the Tennessee Walking Show Horse

## Unified Horse Show Development Program

### Post Show Evaluation

Name of Show: \_\_\_\_\_

Location of Show: \_\_\_\_\_ Address: \_\_\_\_\_

Date of Show: \_\_\_\_\_

Contact person for Show: \_\_\_\_\_ Phone number: \_\_\_\_\_

1. Total number of classes: \_\_\_\_\_
2. Number of TWH classes: \_\_\_\_\_
3. Number of TWH flatshod classes: \_\_\_\_\_
4. Number of TWH padded classes: \_\_\_\_\_
5. Total number of TWH entries: \_\_\_\_\_
6. Number of TWH versatility classes: \_\_\_\_\_
7. TWH per-class payback: \_\_\_\_\_
8. Total prize money: \_\_\_\_\_
9. Number of spectators (Estimate): \_\_\_\_\_

Please briefly critique your show. Was it a success? Describe any improvements that you would implement or changes that you would make. This information may be shared with other show event coordinators.

P. O. Box 259  
Shelbyville Tennessee 37162

