

DETAILS OF JUDGE

Name: _____ AQHA Membership #: _____
 Address: _____
 Contact #'s: (h) _____ (bh) _____ (mobile) _____
 Fax: _____ Email: _____
 Status: Accredited / Associate / Trail

SHOW DETAILS

Name of Organising Committee: _____
 Date's of Show/Event: _____ Venue: _____
 Show Manager: _____ Phone Number: _____
 Show Secretary: _____ Phone Number: _____

TRAVEL, ACCOMMODATION & REMUNERATION DETAILS

Agreed daily fee for services: \$ _____ per day (9 hour day as per rules 54.29, 54.30 & 54.31 AQHA Official Handbook)
 X Total Number of days: _____
= Total Payment Due: \$ _____
 Travelling costs to the value of \$ _____ will be met by: _____
 Accommodation & meals will be provided by the host Club, they are not responsible for phone calls other than as specified in rule 54.14 or alcoholic drinks:
 Check in date: _____ Check out date: _____
 Accommodation will be: Private / Hotel / Motel / Other _____

EVENTS

Enclosed with this contract is a program of events, a list of available trail equipment, approximate size of the arena & the position of the gate. Please advise which patterns you will be forwarding?

Trail	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Hunt Seat Equitation	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Showmanship	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Reining	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Western Horsemanship	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Western Riding	Yes <input type="checkbox"/> / No <input type="checkbox"/>

SIGNATURE

We appreciate your agreeing to Judge our show, this Judging Agreement acts as confirmation of your appointment as Judge for the show detailed.

Signed by Judge: _____ Date: _____
 Address: _____
 Signed by Club Representative: _____ Date: _____
 Representative's Name: _____ Position: _____
 Return Address: _____