

AMHA STEWARD REPORT

Please complete this form legibly, completely and return with all additional paperwork to:

AMHA

5601 South Interstate 35, Alvarado, TX 76009

Name of Show		
Show Location		AMHA Region #
Show Date		
Measurement Stick Name or T	ype	
This report must be		<u>rs</u> after the completion of the show BY THE STEWARD. Of for non compliance of this request.
Show Manager\ Contact Name		
Address	Phone #	
City\State	Zip	
Show Secretary		
Address	Phone #	
City\State	Zip	
Stew	vards please indicate appropriat	e number of sheets or forms collected.
# Horses Measured:		HA Member Applications:
Protest(s):		th Member Applications:
Show Evaluations: _ Other: _	Description:	lations:
the regulations, duties, and auconnection with the managem management to clarify the appriolation of the rules to the marecommendations must be incommended in the rules to the marecommendations must be incompleted by interpreting the rules possible the principle and spirit. Was any judge different for	thority, which pertain to their of ent or judging of the show. Stew dication of the rules involved. It is an agement and make recommen cluded in this report. te as rules may be, they can never as to the letter, the solution to be	Rulebook. Stewards are responsible for a complete knowledge of fice. Stewards are reminded that they have no authority in vards shall keep themselves available to judges, exhibitors, and is their duty to observe and report immediately any instance of a dations for the improvement of the show. Violations and er cover all possible situations that may arise. If a matter can't be adopted by those responsible should follow as closely as ass list?

۷.	indicate names of ai	indicate names of all Apprentice Judges/Stewards .				
	Name	Addre	ess		AMHA Member #	
	Name	Addre	ess		_AMHA Member #	
3.	What time did the sl	how Start and End e	ach day?			
					perly staff and run the show? Yes No	
						_
	Was management conswer is NO , Explain in				No	_
					manner? Yes No	_
7.	Were contacts for th Veterinarian	ne following posted a				_
	Doctor/EMT	Yes No		Name	<u></u>	
8.	Show Grounds Cond	litions. (<i>Use Separati</i>	e Sheet if No	eeded)		
	Food & Refresh	nments available	Yes	_ No	If No, Explain:	
	PA System Ade	quate	Yes	_ No	If No, Explain:	
	Grounds Prope	rly Lighted	Yes	_ No	If No, Explain:	
	Adequate Stabl	ling	Yes	_ No	If No, Explain:	
	Watering and B	Bathing Facilities	Yes	_ No	If No, Explain:	

(Example: announcer, ringmaster, gate person, secretary, show office etc.) Yes NO
If answer is NO , Explain in detail.
Was the show run in accordance with AMHA Rules ? YesNO
If answer is NO , Explain in detail.
Dimensions of Show Arena (s)
Condition of Show Arena (s)
Was a suitable warm up area provided prior to classes? Yes NO If answer is NO , Explain in detail
Were animals measured in accordance with AMHA Rules? Yes NO If answer is NO , Explain in detail
Indicate the type of surface used for measuring
Indicate how many horses were measured:
Please indicate the total number of horses shown at this show
Were any horses disqualified for excessive height?
Registered Name
AMHA Registration #Owner
Explanation
Registered Name
Registered Name AMHA Registration #Owner

st outstanding features of the show, if any. Be sp	ecific in your answer.
st features that need improvement or correction,	. if any. Be specific in your answer.
	,,, ,
teward reports unsigned, incomplete	e, or not received in the AMHA office within ten (10)
	e to a fine and/or loss of steward privileges.
ease Print the Following Information	
eward Name:	AMHA Membership #:
ddress:	City/State:
mail address:	Ph
eward Signature	Date Completed
EPORT OF ADDITIONAL INFORMATION, INCLUDII	

in full the specific nature of the event(s) and how they were resolved. Include names, addresses, and membership numbers when applicable. Keeping communications open between approved Show and AMHA offices are the key tools to protecting the interest of all parties. Use additional sheet if necessary.