



KWHA Judge's Apprenticeship Form

Name: \_\_\_\_\_  
(Name of new judge)

Apprenticeships:

\_\_\_\_\_  
Name of KWHA Show                      Date                      KWHA Judge's Signature

\_\_\_\_\_  
Name of KWHA Show                      Date                      KWHA Judge's Signature

Upon completing your apprenticeship(s). please return this form to the chairman of the judge's committee.