



**ANNUAL JUDGE REPORT**

**ALPACA & LLAMA SHOW ASSOCIATION**  
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**JUDGE COMMUNICATIONS**  
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**NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
**Address** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_  
\_\_\_\_\_ **Phone:** \_\_\_\_\_

**MARK [X] to indicate Present Judge Status .....**

\_\_\_\_ SENIOR LLAMA \_\_\_H\_\_\_Y\_\_\_P\_\_\_F      \_\_\_\_ SENIOR ALPACA \_\_\_H\_\_\_Y\_\_\_P\_\_\_F  
\_\_\_\_ LEVEL LLAMA \_\_\_H\_\_\_Y\_\_\_P\_\_\_F      \_\_\_\_ LEVEL ALPACA \_\_\_H\_\_\_Y\_\_\_P\_\_\_F  
\_\_\_\_ PERF & YOUTH  
\_\_\_\_ APPRENTICE \_\_\_LLAMA\_\_\_H\_\_\_F      \_\_\_\_ APPRENTICE ALPACA \_\_\_H\_\_\_F

**1<sup>st</sup> CERTIFICATION Year:** \_\_\_\_\_ **INSTRUCTORS:** \_\_\_\_\_  
**Most Recent Certification: Year** \_\_\_\_\_ **CECredits** \_\_\_\_\_ **Clinic Attended** \_\_\_\_\_

**2009 ALSA ACTIVITIES**

**SHOW JUDGING**

Mark [X] and indicate [number] judged

**1. Show** \_\_\_\_\_ Llama \_\_\_ Alpaca \_\_\_ Date: \_\_\_\_\_ Supt. \_\_\_\_\_  
\_\_\_\_ Single \_\_\_ Multiple Judge \_\_\_H [ \_\_\_ ] \_\_\_P [ \_\_\_ ] \_\_\_Y [ \_\_\_ ] \_\_\_WF [ \_\_\_ ] \_\_\_F [ \_\_\_ ]

**2. Show** \_\_\_\_\_ Llama \_\_\_ Alpaca \_\_\_ Date: \_\_\_\_\_ Supt. \_\_\_\_\_  
\_\_\_\_ Single \_\_\_ Multiple Judge \_\_\_H [ \_\_\_ ] \_\_\_P [ \_\_\_ ] \_\_\_Y [ \_\_\_ ] \_\_\_WF [ \_\_\_ ] \_\_\_F [ \_\_\_ ]

**3. Show** \_\_\_\_\_ Llama \_\_\_ Alpaca \_\_\_ Date: \_\_\_\_\_ Supt. \_\_\_\_\_  
\_\_\_\_ Single \_\_\_ Multiple Judge \_\_\_H [ \_\_\_ ] \_\_\_P [ \_\_\_ ] \_\_\_Y [ \_\_\_ ] \_\_\_WF [ \_\_\_ ] \_\_\_F [ \_\_\_ ]

**4. Show** \_\_\_\_\_ Llama \_\_\_ Alpaca \_\_\_ Date: \_\_\_\_\_ Supt. \_\_\_\_\_  
\_\_\_\_ Single \_\_\_ Multiple Judge \_\_\_H [ \_\_\_ ] \_\_\_P [ \_\_\_ ] \_\_\_Y [ \_\_\_ ] \_\_\_WF [ \_\_\_ ] \_\_\_F [ \_\_\_ ]

**NON-ALSA SHOW ACTIVITY** .....

**Show** \_\_\_\_\_ Date: \_\_\_\_\_ Supt. \_\_\_\_\_  
\_\_\_\_ Single \_\_\_ Multiple Judge \_\_\_H [ \_\_\_ ] \_\_\_P [ \_\_\_ ] \_\_\_Y [ \_\_\_ ] \_\_\_WF [ \_\_\_ ] \_\_\_F [ \_\_\_ ]

**SHOW SUPT.** \_\_\_\_\_ No. Entries \_\_\_\_\_ Show Name \_\_\_\_\_ Date \_\_\_\_\_

**OTHER RELATED ACTIVITIES** ....SHOW ..... EDUCATIONAL .....

.....Please Note Date and Activity

**COMMENTS**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*Please make a copy for your records. Thank You*