



SURVEY FORM- FOR New Ranch Sorting Members

FULL LEGAL NAME INCLUDING MIDDLE INITIAL: _____

NICK-NAME (IF COMMONLY USED): _____

BIRTHDATE (FULL DATE OF BIRTH REQUIRED): ____/____/____

MAILING ADDRESS: _____

CITY _____ STATE _____ PC _____

HOMEPHONE: _____ MOBILE: _____

EMAIL ADDRESS: _____

PLEASE LIST ALL PENNING/SORTING ORGANIZATIONS THAT YOU HAVE BEEN A MEMBER OF IN THE LAST 10 YEARS AND YOUR RATING. _____ RATING: _____

HOW MANY YEARS/MONTHS HAVE YOU BEEN SORTING/PENNING? _____

HOW MANY AWARDS HAVE YOU WON IN SORTING/PENNING? _____

HOW MANY YEARS/MONTHS HAVE YOU BEEN CAMPDRAFTING? _____

HOW MANY AWARDS HAVE YOU WON IN CAMPDRAFTING? _____

OVER THE PAST 3 YEARS, HOW MUCH MONEY HAVE YOU WON IN CAMPDRAFTING/PENNING?

CD: _____ PENNING: _____

ON A SCALE OF 1 TO 9 (1 BEING A BEGINNER/9 BEING A PROFESSIONAL),
PLEASE RATE YOUR ABILITY: _____

ON A SCALE OF 1 TO 9 (1 BEING VERY GREEN/9 BEING VERY TRAINED),
PLEASE RATE YOUR HORSE: _____

THIS FORM SHOULD BE SUBMITTED TO THE PRODUCER AT THE NEXT RSNC SANCTIONED EVENT
YOU ATTEND. THE PRODUCER WILL THEN APPLY A TEMPORARY RATING AND MAIL IT TO THE

Temporary Rating _____

Date: _____

Show Location: _____

Producer's Name & Initials: _____

Producer's Signature: _____