



**New Zealand Amateur Rock'n'Roll
Association Inc.**



ASSESSMENT COVER LETTER

This form must be completed if you do not have a programme

ATTN: NZARRA Head Judge

FROM: _____

DATE OF ASSESSMENT: _____

JUDGES: _____

BEING ASSESSED: (Please use additional sheets if necessary)

JUNIOR OR SENIOR NATIONALS				
SECTION(S)				
NAMES				
COLOURS				
PASS	YES / NO	YES / NO	YES / NO	YES / NO

***** JUDGES & SCRUTINEERS SHEETS ARE ATTACHED**

SIGNED: _____

NAME: _____

CONTACT EMAIL: _____

CONTACT PH: _____