

# Free State Appaloosa Horse Club Saddle Log/Horseback Riding Program Log Sheet

Check one: RIDING \_\_\_\_\_ DRIVING \_\_\_\_\_

Time frame: 6/1/\_\_\_ thru 5/31/\_\_\_



**Rider's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

Horse's Name (A) \_\_\_\_\_

Horse's Name (B) \_\_\_\_\_

Horse's Name (C) \_\_\_\_\_

**\*Rider's Phone #** \_\_\_\_\_

Date Horse Hours Date Horse Hours Date Horse Hours Date Horse Hours

| Date | Horse | Hours | Date | Horse | Hours | Date | Horse | Hours | Date | Horse | Hours |
|------|-------|-------|------|-------|-------|------|-------|-------|------|-------|-------|
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |
|      |       |       |      |       |       |      |       |       |      |       |       |

Total Hours: \_\_\_\_\_ Total Hours: \_\_\_\_\_ Total Hours: \_\_\_\_\_ Total Hours: \_\_\_\_\_  
 Page total \_\_\_\_\_

**YEARLY TOTAL:**  
 Hours: \_\_\_\_\_ Minutes: \_\_\_\_\_

**REMINDER:** Membership renews each January. Hours **will NOT** count until saddle log fees are paid.

Return to: Kathy Coviello, 1211 S. Eads St. Apt#401, Arlington, VA 22202