AQHA

HORSEBACK RIDING PROGRAM

Hourly Log Sheet

(One horse per sheet) Please return by December 31.

Rider's Name: _____ **AQHA I.D.#:** _____

Horse's Name: _____ **Registration#:** _____

DATE MO/DAY/YEAR	NUMBER OF HOURS	LOCATION WHERE RIDING i.e. NAME OF STATE PARK, FOREST, AQHA TRAIL RIDE, PRIVATE LAND, ETC...	NAME OF TRAIL WITHIN THE LOCATION INDICATED (if applicable)	STATE, PROVINCE OR INTERNATIONAL COUNTRY WHERE THE TRAIL IS LOCATED
7/21/04	*3*	*Palo Duro Canyon State Park (example)*	*Light House Trail*	*Texas*