SADDLE TIME HOUR LOG

RIDER INFORMATION

Rider Name:_____ Parent/Guardian Email:_____

ASHBA Membership #:_____ Levels Completed:_____

DATE	HORSE'S NAME	REGISTRATION #	ACTIVITY	HOURS
			TOTAL HOURS	

Total Saddle Time Hours Being Submitted: _____

SADDLE TIME REPORT

DATE	HORSE'S NAME	REGISTRATION #	ACTIVITY	HOURS
			TOTAL HOURS	

Total Saddle Time Hours Being Submitted: ____________________

SADDLE TIME REPORT

DATE	HORSE'S NAME	REGISTRATION #	ACTIVITY	HOURS
			TOTAL HOURS	

Total Saddle Time Hours Being Submitted: ___________________