SQHA

Horseback Riding Program

All Breed Hourly Log Sheet

(One horse per sheet) Return by December 31 of _____
Current year

Rider's Name:_____ **SQHA Member: Individual/Group/Youth (circle)**

Horse's Name:_____ **Breed:**_____

Date	Number of hours	Location: arena, barn, etc

Total Hours:_____(in whole or half increments)

Return completed sheet by mail to: SQHA Horseback Riding Program, Box 126, Aylesbury, SK S0G 0B0 or email to : info@sqha.org

Must be a current member of SQHA and enrolled in the Horseback Riding Program to submit log sheets.

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