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Office Use Only		

Saddle Log Time Sheet

		Log Sheet No: Registration #				
Horse Name:						
Rider Name:Rider Address:		Membership #				
				Zip:		
Phone ()	Email:					
Please enter the pre	vious accumulated hours					
Date	Location	Start Time	End Time	Total Time		
		1	1			

Total Hours:_____

Please keep copies when submitting to ARHA Office. We will not be responsible for time sheets not received in office.