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Office Use Only

Saddle Log Time Sheet

Log Sheet No: _____

Horse Name: _____ Registration # _____

Rider Name: _____ Membership # _____

Rider Address: _____ City: _____ State: _____ Zip: _____

Phone (____) _____ Email: _____

Please enter the total accumulated hours..... _____

Date	Location	Start Time	End Time	Total Time

Total Hours: _____

*Do not send before December of the current. Deadline line is 12/31.
 Please keep copies when submitting to ARHA Office. We will not be responsible for time sheets not received in office.*