**Return to: Sgt. At Arms / IRFC HORSEBACK RIDING\_\_\_\_\_\_\_ DRIVING\_\_\_\_\_\_\_ Disabled\_\_\_\_\_\_\_\_**

**PO Box 569**

**Valley Mills, Tx. 76689 \_\_\_ /\_\_\_ /\_\_\_\_\_ thru \_\_\_ /\_\_\_ /\_\_\_\_**

**Rider’s Name**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Horse’s Name (A)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Horse’s Name (B)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Horse’s Name (C)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Horse’s Name (D)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Horse’s Name (E)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*Rider’s Age**: \_\_\_\_\_\_\_ (**as of March 1st of award year) Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Horse Hours Date Horse Hours**

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**Total Hours Horse A:\_\_\_\_\_\_\_\_\_\_ Total Hours Horse B: \_\_\_\_\_\_\_\_\_ Total Hours Horse C:\_\_\_\_\_\_\_\_**

**Total Hours Horse D: \_\_\_\_\_\_\_\_\_\_ Total Hours Horse E:\_\_\_\_\_\_\_\_\_**

**MONTHLY TOTAL: PAGE #\_\_\_\_ = \_\_\_\_\_\_\_\_\_**

**I hereby state the above is true and accurate and all dues and enrollment fees are paid in full for all hours on this log.**

**Rider’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I am 18 yrs. of age or older and hereby Witness the above.**

**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**