

"EVERY ACCOMPLISHMENT BEGINS WITH A DECISION TO TRY" – author unknown



**HOURLY LOG SHEET**



*(Please return by December 31st.)*

Horsemanship Rewards Participant Name: \_\_\_\_\_

KHC Member ID #: \_\_\_\_\_ Calendar Year: \_\_\_\_\_

Current Log#: \_\_\_\_\_ Previous Total Hours Submitted: \_\_\_\_\_

Date (Month/Day)	Number of Hours	Location in General: Name of Trail, Stable, Arena?	City, State	Name of Horse	Breed: ("G" if Grade)

PLEASE TALLY YOUR TOTAL HOURS BEFORE SUBMITTING: (*Hours on this log* \_\_\_\_\_)

**PLEASE SUBMIT HOURS QUARTERLY**

Return Completed Log to Kansas Horse Council, C/O KHC Horsemanship Rewards Program, 8831 Quail Lane, Suite 201, Manhattan, KS 66502/ or by fax to 785-539-2928. Must be a current member of KHC and enrolled in the KHC Horsemanship Rewards Program.