## International Colored Appaloosa Association, Inc

# ICAA Trail Log Program Report Sheet

Horse's Name: _____ Registration # _____ Page ____ of ____

Rider's Name: _____ Member # _____ Submit when 100 hours achieved

| Date of Ride (month/day/year) | Total Hours of Ride/Drive | Type of Riding (ex Trail, Schooling) | Rider | Running Total of Hours | Comments |
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| **TOTAL HOURS**: | | | | | |

**Submit this form when 100 hours have been achieved to ICAA, 4610 New Mexico 206, Milnesand, NM 88125.**
**Multiple pages may be used. May be scanned and emailed to icaa@icaainc.com.**

Revised 2017