OSBA

OHIO STATE BUCKSKIN ASSOCIATION

2026 Trail Riding Program

Rider's Name: _____

Horse's Name: _____

Division A & B & C Circle one **IBHA Registration # (Division A & B only):** _____

Adult or Youth Circle one

Date	Hours

Date	Hours

TOTAL HOURS:

Please submit completed log sheet to the Trail Riding Program Coordinator by November 4th, 2026

Carmen Kellenbarger Porter, 18471 Brushy Fork Road SE, Newark, OH, 43056

supershifter363@gmail.com

Prefed method is email but if you cannot we understand! :)

Rider must be a current member of OSBA and enrolled in the OSBA Trail Riding Program