



# OSBA

OHIO STATE BUCKSKIN ASSOCIATION  
2025 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, 2025  
 Carmen Kellenbarger Porter, 18471 Brushy Fork Road SE, Newark, OH, 43056  
[supershifter363@gmail.com](mailto: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\**