

## FEEDING SCHEDULE

<b>Horse's Name</b>			
<b>Owner's Name</b>			
	<b>Grain</b> <i>Type/Amount</i>	<b>Hay</b> <i>Type/Amount</i>	<b>Other</b>
<b>AM</b>			
<b>Type</b>			
<b>Amount</b>			
<b>PM</b>			
<b>Type</b>			
<b>Amount</b>			

Medications?  Yes  No

**Medications to be administered/supervised by adult instructor:**

<b>Type/Name:</b>	
<b>Instructions for administration:</b>	