



# CROSS STATE TRAIL RIDE, INC

Founded in 1970 - Incorporated in 1976

## CSTR MEMBERSHIP APPLICATION

APPLICATION MUST BE POSTMARKED BETWEEN SEPTEMBER 1 AND SEPTEMBER 30 EACH YEAR  
YOU MUST HAVE ATTENDED AT LEAST ONE JUNE CSTR RIDE BEFORE MAKING APPLICATION.  
APPLICATIONS RECEIVED OUTSIDE THIS TIME FRAME WILL BE REJECTED  
AND YOU MUST OBTAIN A WRITTEN RECOMMENDATION FROM ONE OR MORE CURRENT CSTR  
MEMBERS. THE SPONSOR(S) MUST FORWARD THEIR RECOMMENDATIONS DIRECTLY TO KAREN  
WOOD. THEY SHOULD NOT ACCOMPANY THIS APPLICATION.

Name \_\_\_\_\_  
(please print)

Mailing address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_ Photo Attached ? \_\_\_\_\_  
*Please note that sponsor(s) must forward their recommendation separately directly to Karen Wood*

June Ride(s) attended \_\_\_\_\_

You may answer the questions directly on this form, or on a separate sheet.

1. List or describe your experience in both riding and caring for horses

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2. List or describe your trail riding experience

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3. List or describe your experiences camping with horses

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4. List or describe your experiences being a member of clubs or other organizations

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5. List or describe your experiences in volunteer activities for any of the above organizations or for the community as a whole

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6. List or describe ways that you would be willing to be of service to CSTR

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7. Is there anything special that you would like CSTR to consider about you?

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SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Please mail application to:

**→→→ Karen Wood, 180 Main Street, Atkinson, NH 03811**