



Geauga County Chapter of The Ohio Horseman's Council

Horsemen Helping Horsemen <https://ohconline.com/>

President Jennifer Salo	Vice President	Secretary/ Membership Donna Kennedy	Treasurer Cindy Orben
Trail Miles Coordinator Linda Golding	Web Designer Cindy Wynne	Park Liaison/ Newsletter Michelle Rossman	Liaison to The Foundation for GP Sue Lundstrom

For contact information see separate email

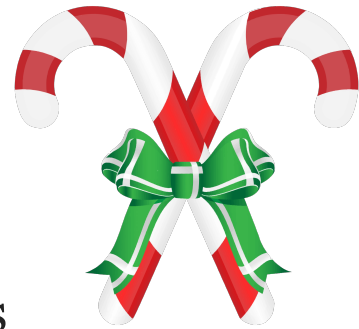
In this Issue:

- Trail Miles Report
- Minutes from the 11/4 Meeting including Officer Election - new Officers begin their term January 1, 2026

CONGRATULATIONS TO OUR NEW OFFICERS

- Park Closures for Controlled Hunting
- Foundation for Geauga Parks Bridle Trail Fund
- Membership Form - members will have received a mailing from OHC with the newsletter and a prefilled membership application for those who don't like to renew memberships online. There is a **mistake on the form**. It has the old Equisure pricing of \$20 individual and \$40 family. If members sign up online, the Equisure coverage is \$25 for an individual and \$50 for a family. If a form is printed off the website, it will be correct at \$25 and \$50. This mistake applies to what was sent to members in the USPS. **Form in this newsletter is correct.**

Wishing everyone Happy Holidays



FROM THE TRAIL DESK;

Individual Summary reports are due in my hands by **January 5, 2026**, so I can begin calling those who need help.

Please list separately any parks where you have trail miles but the park name is not on this printed summary page and use the "other" category where possible.

Also, submit your final summary to me, Linda Golding, using email (mrcoolsmom@aol.com), my mailing address 16650 Auburn Road, Chagrin Falls, OH 44023) or you may call or text me with your report of 100 miles or less, which DOES INCLUDE the PARK NAME. If you are new to this process of reporting, I can help you if you just ask me. My phone is 440 669 6369 or text a brief message to request help. ~Linda



2025 INDIVIDUAL SUMMARY

NAME		YOUTH?		COUNTY	
TOTAL MILES		0		EMAIL	
PARKS/FORESTS	MILES	PARKS/FORESTS	MILES	PUBLIC/PRIVATE	MILES
ALLARDALE		LITTLE MIAMI ST. PARK		AEP - FALLON PK COSHOCT	
ALUM CREEK STATE PARK		LOBDELL RESERVE		AEP - MEIGS COUNTY	
APPALACHIAN HILLS - Morgan C		MALABAR FARM ST. PAR		BUCKEYE TRAIL	
ASHTABULA GULF		MAUMEE STATE FOREST		CAMP TUSCAZOAR	
BARKCAMP STATE PARK		MIAMI WHITEWATER-HA		EAST BRANCH TRAIL	
BATH NATURE PRESERVE		MIAMI WHITEWATER-SH		CONG. REGULA CANAL TOV	
BEARTOWN LAKES		MOHICAN MEMORIAL S		MOHICAN VALLEY BRIDGE	
BEAVER CREEK STATE PARK		MOSQUITO LAKE ST. PA		NORTH COAST INLAND - HU	
BIG CREEK		MT GILEAD STATE PARK		RAILS TO TRAILS	
BLUE ROCK STATE FOREST		OAK OPENINGS METRO		TRI-COUNTY TRAILS	
BRUSH CREEK STATE FOREST		OBSERVATORY PARK		add to list here	
BUCK CREEK STATE PARK		PAINT CREEK ST. PARK		add to list here	
BURR OAK STATE PARK		PENITENTIARY GLEN		HOME	
CAESAR CREEK STATE PARK		PERRY STATE FOREST		OTHER - PUBLIC/PRIVATE	
CAESAR FORD PARK-XENIA		PIKE LAKE STATE PARK		PUBLIC/PRIVATE	0
CARLISLE RESERVATION		PLEASANT HILL LAKE		OUT OF STATE	STATE MILES
CARRIAGE HILL METRO PARK		POSSUM CREEK METRO		CANEY MOUNTAIN	AR
CHAPIN FOREST RESERVATION		PRAIRIE OAKS METRO		SHAWNEE NATIONAL	IL
CHARLEMONT RESERVATION		QUAIL HOLLOW ST. PAR		BROWN COUNTY	IN
CLEVELAND METRO - BEDFORD		RICHFIELD HERITAGE PE		HARRISON CRAWFORD	IN
CLEVELAND METRO - BRECKSV		ROCKY FORK METRO PA		HOOSIER NATIONAL	IN
CLEVELAND METRO - HINCKLE		SALT FORK STATE PARK		SALAMONIE	IN
CLEVE. METRO - MILL STREAM		SCIOTO TRAIL ST. FORES		VERSAILLES	IN
CLEVE. METRO - NORTH CHAGI		SEBALD METRO PARK		WHITEWATER	IN
CLEVE. METRO - ROCKY RIVER		SHAWNEE STATE FORES		LAND BETWEEN THE LAKE	KY
CLEVE. METRO - SOUTH CHAGI		SILVER CREEK METRO		DANIEL BOONE NATIONAL	KY
CVNP - PERKINS/RIDING RUN		SLATE RUN METRO PARK		MAMMOTH CAVE NATIONAL	KY
CVNP - VALLEY TRAIL N. & S.		STROUD'S RUN ST. PARK		SHORE TO SHORE	MI
CVNP - WETMORE		SUGAR CREEK METRO		WATERLOO	MI
DEAN STATE FOREST		SWINE CREEK		EMINENCE	MO
DEER CREEK STATE PARK		SYCAMORE STATE PARK		OTTER CREEK	NY
DILLON STATE PARK		TAFT RESERVE		ALLEGHENY NATIONAL	PA
EAST FORK STATE PARK		TAR HOLLOW ST. PARK		BENEZETTE	PA
EDISON WOODS PRESERVE		THAYER RIDGE PARK		COOK'S	PA
ENGLEWOOD METRO PARK		TWIN CREEK METRO		FLYING W RANCH	PA
GEORGE ROGERS CLARK		VAN BUREN STATE PARK		BLACK HILLS NATIONAL - C	SD
GIRDLED ROAD RESERVATION		VICKERS NATURE PRESE		BIG SOUTH FORK	TN
GLACIER RIDGE METRO		WALBORN RESERVOIR		BUFFALO RIVER	TN
GREAT SEAL STATE PARK		WAYNE NF - KINDERHOC		HIGH COUNTRY HORSE CA	VA
HAMMERTOWN LAKE		WAYNE NF - LAKE VESU		IRON MOUNTAIN	VA
HARRISON STATE FOREST		WAYNE NF - PLAINVIEW		NORTH BEND STATE PARK	WV
HEADWATERS PARK		WAYNE NF - STONE CHU		add to list here	0
HOCKING STATE FOREST		WELLINGTON RESERVAT		add to list here	0
HOLBROOK HOLLOWS		WEST BRANCH STATE PA		add to list here	0
HONEY CREEK PARK - MIAMI C		WEST WOODS PARK		add to list here	0
HUESTON WOODS ST. PARK		WHITE STAR PARK		OTHER - OUT OF STATE	0
INFIRMARY MOUND PARK		WHITEACRE GREER		OUT OF THE USA - COUNTR	0
JEFFERSON LAKE ST. PARK		WINTON WOODS PARK		OUT OF STATE TOTAL	0
KIPTON RESERVATION		ZALESKI STATE FOREST		SADDLE HOURS	HOURS
KISER LAKE STATE PARK		Add State Pk & Forest		COMPETITION	
KYLE PARK HORSE TRAIL		Add State Pk & Forest		SCHOOLING	
LAKE SNOWDEN		OTHER - PARK & FOREST		DRIVING	
LETHA HOUSE PARK		PK/FRST TOTAL	0	SADDLE HOURS TOTAL	0

REVISED February 2025
miles to the county.

Individuals are to use this form or the form provided by their county, to submit
ONLY At-Large members, send this form directly to state chairperson.

**Geauga Ohio Horsman's Council
Meeting Minutes**

Date: November 4, 2025
Location: Mangia Mangia
Time: 6:00 pm

Attendees:	Jennifer Salo	Dottie Drockton	Barb Jurgens	Cindy Orben
	Doug Kennedy	Donna Kennedy	Barb Meholick	Toni Lima
	Linda Golding	Cindy Wynne	Penny Passalacqua	

The meeting was called to order at 7:00 pm.

The purpose of the meeting was to elect 2026 Board members.

The positions and description of duties for President, Vice President, Secretary and Treasurer were clarified. Nominations were as follows:

- President – Donna Kennedy
- V. President – Linda Golding
- Secretary – Jen Salo
- Treasurer – Cindy Orben

Linda made a motion to vote. Cindy W. seconded. All in favor of said nominations. Aye- unanimous,

Cindy Wynne will continue as website designer. Donna Kennedy will continue as membership coordinator. Linda Golding will continue as trail mile liaison.

Other business: Annual banquet will be April 18, 2026 at Big Creek. We will have the flea market this year. Jen to reserve the pavilions at West Wood.

Meeting adjourned at 7:45

Geauga Park District

CONTROLLED HUNTING CLOSURES

Four parks will be closed for controlled hunting this season: [Observatory Park](#) on December 1 and 2, [The West Woods](#) on December 4 and 5, [Big Creek Park](#) on December 20, and [The Rookery](#) on January 3

For More info:

<https://geaugaparkdistrict.org/activity/hunting/>

Message regarding Geauga Park District,
from Dottie Dockton:

Please only ride on trails open to horses.

Trail usage in Geauga Park District is specified by icons on the trail map for each park you visit. Check the drop-down menu for activities, horseback riding and find the trails open to horses before you ride.



[Horseback Riding Trails | Geauga Park District](#)

Bridle Trail Fund

Please consider donating to the Bridle Trail Fund so we can assist monetarily in the development of more trails. When donating through the online form put “Bridle Trail Fund” in the comments section.

<https://www.foundationforgeaugaparks.org/pages/donate>



Foundation *for*
Gauga Parks

DID YOU KNOW?

The Foundation for Geauga Parks partnered with the Ohio Horseman's Association Geauga Chapter to raise more than **\$36,000** to construct the new **Tulip Trail equestrian and multipurpose trail** at the West Woods.



Help enhance trail
accessibility in
Gauga County.



Ohio Horseman's Council, Inc.
Membership Application for Year 20_____ (enter year)
Membership Year is from January 1 to December 31
Geauga County Chapter

() New () Previous Member

Please print clearly

Name: _____ Birth Year: _____ Phone: _____ ☐ Cell ☐ Other

Spouse/Partner/Other: _____ Birth Year: _____ Phone: _____ ☐ Cell ☐ Other

Address: _____ City: _____ State: _____ Zip: _____

☐ Address Above is a Change of Address

The Corral and Newsletter are included with your membership.

Email: _____ ☐ I do not want to receive the Corral.

If Family membership, list names and ages of dependents residing in your household. If member is listed above, do not include in this space.

1. _____ 2. _____ 3. _____ 4. _____
 (Name) (Birth Year) (Name) (Birth Year) (Name) (Birth Year) (Name) (Birth Year)

OHC Basic Membership (Without Equine Excess Liability Insurance)				
Type (please check appropriate box)	Membership Dues	Chapter Charge		Total
<input type="checkbox"/> Individual (Age 18 or older; No dependents)	\$25.00	\$5.00		\$30.00
<input type="checkbox"/> Youth (under age 18; parental/guardian signature required)	\$10.00	\$5.00		\$15.00
<input type="checkbox"/> Family (includes spouse/partner/other and/or dependents)	\$35.00	\$5.00		\$40.00

OHC Plus Membership (With Equine Excess Liability Insurance)				
Type (please check appropriate box)	Membership Dues	Chapter Charge	Insurance	Total
<input type="checkbox"/> Individual (Age 18 or older; No dependents)	\$25.00	\$5.00	\$25.00	\$55.00
<input type="checkbox"/> Family (includes spouse/partner/other and/or dependents)	\$35.00	\$5.00	\$50.00	\$90.00

Associate Membership (List contact person's information at top of form)		
Open to groups desiring to support OHC; must be affiliated with a chapter.		
No. of Members	Membership Dues \$40.00 + \$5.00 chapter charge	Association Name:

Primary applicant(s) must sign. Parent or guardian must sign in addition to applicant under age 18. Please date this document.
 By signing this document, I (we) agree to the terms and conditions of the Bylaws of the Ohio Horseman's Council, Inc.

SIGNATURE: _____ DATE: _____
 SIGNATURE: _____ DATE: _____

Make checks payable to: **Geauga County OHC**

Send to: **Cindy Orben, Treasurer**
7231 Country Lane
Chagrin Falls OH 44023

For Chapter Use Only

Membership Card issued by: _____ (initials) **Date:** _____

Insurance Card issued by: _____ (initials) **Date:** _____

Insurance Certificate issued by: _____ (initials) **Date:** _____

Rec'd by _____ **Date** _____ **Amount** _____ **Check #** _____ **or Cash ()**

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