

CROSS STATE TRAIL RIDE

Thirty Third Annual Open Memorial Pleasure Trail Ride



JUNE 12 to 14, 2026

Ride Location

**Myles Standish State Forest
Boy Scout Camp Squanto Field
200 Cuttersfield Rd Plymouth MA**

RIDE FEES—WEEKEND ONLY
CSTR MEMBER ADULT = \$150.00
CSTR MEMBER JUNIOR = \$135.00
NON MEMBER ADULT = \$170.00
NON MEMBER JUNIOR = \$155.00
Friday Welcome Party included

**NO PETS PLEASE !
NO POST ENTRIES !
\$30 CANCELLATION FEE !**

Entries and Ride Inquiries
Margo Petracone
600 West Street
Barre, MA 01005
978-621-9812
westwindfm@aol.com

Pre-Registration only

Entries close June 5 and all entry forms and payments must be received by then

No refunds after June 5th unless space can be filled. We will place the order with the caterer after that.

Payment may be made by mail to the address above or by PayLink on our website at

<https://cstronline.com/june-ride>

Entry form must be submitted even if you use PayLink to pay

Register with online form
<https://forms.gle/i5hrnJfZ9BDg9sw89>

**AFFILIATED WITH
NEW ENGLAND HORSE &
TRAIL**

**Visit us online at
www.cstronline.com**

- This is an unjudged, open pleasure ride, affiliated with New England Horse & Trail Assoc
- Mileage: Friday's trail will be 5-6 miles. Saturday's trail will be 12 miles and Sunday will be 10 miles.
- There will be NO driving.
- Bring your own horse & people water.
- Everyone in camp (rider or non-rider) must be registered with the ride and pay the fee.
- Entry registration is for Friday to Sunday only
- No Dogs/No Pets -
- Bring Manure bucket and fork to facilitate cleanup
- A negative Coggins Test is required.
- Because of changing Federal Regulations regarding the transportations of horses across state lines consult your local vet for advice. MA requires out of state horses to have a health certificate. Consider having a rabies certificate.
- Plan on registering as soon as you are set up.

The grounds will be open on Friday, June 12. **DO NOT PLAN on entering the field between 11 am to 12 noon—school buses will be entering and leaving the camp road.** All riders must be on the grounds by 7 AM on Saturday morning. Please check in with Registration when you arrive. Saturday and Sunday meals are catered. Saturday meals include breakfast (8AM) Lunch in camp and Supper (6:30PM) Sunday includes breakfast 8 AM and lunch at 1 pm. Plan on keeping paddock size to an approx 25' x 25'

Welcome Pot Luck Friday night at 6:30 pm is included in the ride fee. The club will provide the entrée, plates, tableware and drinks. Please bring a side dish to share. Please plan your own meals for Thursday and Friday breakfast and lunch.

CROSS STATE TRAIL RIDE

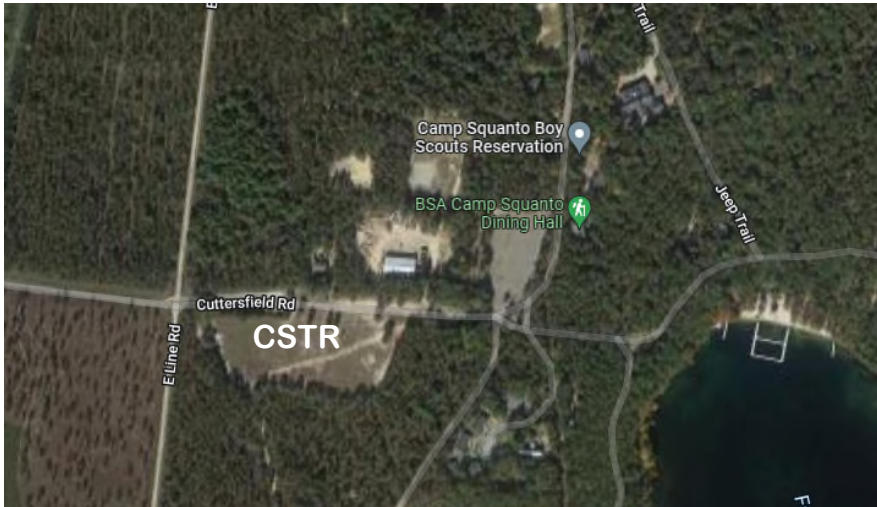
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Directions: <https://goo.gl/maps/WhjKsP3PGoCUNiQx8>



DIRECTIONS - FROM RTE 495 - Take Exit 2 off Rte 495 (Rte 58) and follow signs to Miles Standish State Forest. Go 3.2 miles to a right on Cranberry Rd, then 2.8 miles to headquarters and detour sign. Turn left onto Lower College Pond Rd and follow for 1 mile. At fork, bear right onto Halfway Pond Rd., Go 8 tenths to a right onto Upper College Pond Rd. Go 1 mile to a left onto Fearing Pond Rd., then 1.4 miles to a right onto Cuttersfield Rd., and 1.1 miles to Camp Squanto

FROM Rte 3 - Take Exit 13 off Rte 3 onto Long Pond Rd., travel 3.7 miles to Miles Standish State Forest Entrance on the right. Travel 1.8 miles on Alden Pond Rd to a left onto Upper College Pond Rd., then 3 miles to a left onto Fearing Pond Rd, then 1.4 miles to a right onto Cuttersfield Rd., and 1.1 miles to Camp Squanto. **Do not use GPS in the PARK - it will not be accurate. DO NOT PLAN on entering the field between 11 am to 12 noon. The Boy Scout camp will be releasing campers and school buses will be entering and leaving Cuttersfield Road making the road congested. The road is too narrow to accommodate horse trailers and buses.**

Water - Please bring your own horse water. Emergency horse water will be available.

Hay & Grain – Bring your own hay and grain.

Chair – Bring a chair for meals with a food tray to carry your meal.

Gathering Campfires – There will be one fire for everyone to join. NO INDIVIDUAL FIRES.

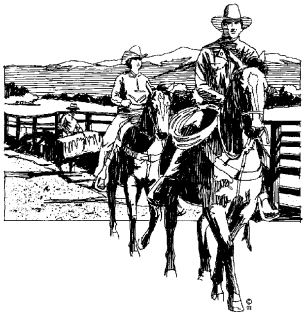
Friday Welcome Potluck Gathering & Dinner–The club will provide the main entree. Please bring side dishes, veggies and desserts to share. Bring serving utensils for your pot luck items. The club provides plates & tableware, etc. Bring your own beverage. Dinner will begin at 6:30 .

Catered Meals begin Saturday Morning with breakfast, lunch and dinner and Sunday with Breakfast and end with Lunch.

Swimming – There are 4 beaches within the state forest at Boulder Beach, Kettle Pond, Ricker Pond, and Stillwater.

Manure Disposal – Directions for manure management will be given during the ride. Please keep the access road near your campsite clean and leave your site spotless!

Cell Service: Cell service is spotty and can't be depended on.



Thirty Second Annual Cross State Trail Ride Memorial Pleasure Trail Ride

June 12 to 14, 2026 Affiliated with NEHT

NO DOGS - NO POST ENTRIES - \$30 CANCELLATION FEE
Completed entries must be received by June 5 - No refunds after June 5 unless space is filled

Registration Form - 2026 CSTR Spring Weekend

Please fill in a separate entry form for each entrant whether rider or non-rider

Name _____ Phone _____

Address _____ CSTR Member: ____ YES ____ NO

_____ e-mail _____

CSTR Members ADULT Weekend	_____ @	\$ 150.00 = \$ _____
CHILD (under 12) Weekend	_____ @	\$ 135.00 = \$ _____
Non-Members ADULT Weekend	_____ @	\$ 170.00 = \$ _____
Non-Member CHILD Weekend	_____ @	\$ 155.00 = \$ _____
Become a CSTR member and register for the member rate		
CSTR Membership (Individual adult)	_____ @	\$ 35.00 = \$ _____
CSTR Membership (Junior)	_____ @	\$ 10.00 = \$ _____

Alternate options:
Register with online form
<https://forms.gle/i5hrnJfZ9BDg9sw89>

Website PayLink
<https://cstronline.com/june-ride>

NEHT Rider # _____ Horse # _____

Current Coggins Number: _____ and State _____ Include copy of Coggins

Food Includes Welcome Pot Luck Party Friday night, 3 Meals on Saturday and Breakfast and lunch on Sunday

List dietary restrictions/allergies _____

Riding includes marked trails on Friday, Saturday and Sunday. Campers can arrive on anytime on Friday.

Waiver and Release of Liability

In consideration of being allowed to participate in any way in Cross State Trail Ride activities or events, I, the undersigned, and also including persons associated with me who may not be entered in the event, (1) Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death and severe social and economic losses which might result from their own actions, inaction or other risks not known to me or us or reasonably foreseeable at this time and also from the actions and/or inactions of others (2) Assume all the foregoing risks and accepts personal responsibility for the damages following such injury, permanent disability or death (3) Release, waive, discharge and covenants not to sue Cross State Trail Ride, Inc., its officers, directors or members, MA Dept of Environmental Management, Boy Scout Squanto, landowner and other owners and leasees of premises used to conduct the event, all of which are hereinafter referred to as "releasees"; from demands, losses or damages on account of injury, including death or damage to property caused or alleged to be caused in whole or in part by negligence of the releasees or otherwise and (4) Have read and signed the above Waiver and Release voluntarily and understand that I have given up substantial rights. I understand that trail riding can involve being in remote areas for extended periods of time, far from communications, transportation, and medical facilities; and that these areas may have many natural hazards which ride management cannot anticipate, identify, modify, or eliminate; that horses can be excitable, difficult to control, and unpredictable; and that accidents can happen to anyone at any time

Signature _____ Date _____

Signature of parent or guardian of minor child – **Give age of entrant if under 18** _____

Name of Emergency Contact _____ Phone _____

Mail to : Mail to : **Margo Petracone, 600 West Street, Barre, MA , 01005**
Make checks payable to CROSS STATE TRAIL RIDE INC.