

**Bay State Trail Riders Association, Inc.**  
**DONATION REMITTANCE FORM**

**100% of your tax-deductible donation funds trail projects\***

*\*Trails must be on public land—open for equestrians and other forms of outdoor recreation and fitness*

Donation Amount

\$

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

\_\_\_ I would like to make this donation a:

\_\_\_ Memorial Gift \_\_\_ Honor Gift \_\_\_ Anonymous Gift

Name of person your gift is in memory/honor of:

\_\_\_\_\_

\_\_\_ I would also like to volunteer at trail work days. Please email me  
work day schedule and contact information.



Remit check payable to BSTRA, Inc. and this form to:

BSTRA, Inc.

c/o 76 NW Main St.

Douglas, MA 01516