Orestimba Horse Campout Event

ADULT PARTICIPANT WAIVER

The undersigned voluntarily agrees to participate in the Orestimba Horse Campout event sponsored by The Pine Ridge Association from May 7th – 10th, 2026.

The undersigned recognizes that neither The Pine Ridge Association nor the State of California has undertaken any duty or responsibility for his/her/their safety and the undersigned agrees to assume the full responsibility for all risk of bodily injury, death, disability, and property damage as a result of participating in the Orestimba Horse Campout event. The undersigned recognizes that this event is held in a wilderness area. Territory could be familiar, but as in nature, conditions may become unpredictable and unfamiliar quickly. You participate at your own risk, acknowledging there are inherent dangers in horseback riding as well as from natural conditions such as wildlife, dangerous vegetation, uneven walking/riding surfaces, and unmarked areas. Trail conditions may vary by season, and it is your responsibility to be prepared with proper equipment, including footwear, protective clothing, and proper hydration. While guided tours or events at the park may be available, you will have the opportunity to explore without a dedicated guide. You do so at your own risk.
By my signature:

- I hereby surrender any right to seek reimbursement from The Pine Ridge Association, the State of California, and their directors, officers, employees, volunteers and other agents for injury sustained and liability incurred during my participation in the activity described above. By my signature, I warrant that I am not relying on any oral representations, statements or inducement apart from the statements made on this form.
- I hereby state that I understand the risks involved in participating in the Orestimba Horse Campout event and willingly and voluntarily accept these risks.
- I agree to follow the established rules of conduct and any safety protocols for this event, including adherence to all park rules

By signing below, the parties confirm that they have read, understand, and consent to the terms of this waiver agreement.

_____ _____

Signature Printed Name

_____

Date