



MURPHY RANCH

Trail Trial



Saturday Trail

5-6 miles

10 obstacles

MARCH 28-29, 2026
ROAD 63, BROOKS, CA

Sunday Trail

3-4 miles

8 obstacles

A trail trial consists of a ride with approximately 10-12 judged natural obstacles that appear along a trail of several miles in parks or private property. This is not an arena event.

ENTRY INFORMATION AVAILABLE AT: www.trailtrials.com

LIMITED TO 50 RIDERS - PRE-ENTRY RECOMMENDED

Saturday and Sunday

Check In: 8:00 am

Ride Starts: 9:30 am

Moderate Terrain

OVERALL 2 DAY BUCKLES

Novice • Intermediate • Advanced

Day Awards 1st thru 3rd

Ribbons thru 6th

THANK YOU TO OUR AWARD SPONSORS



CAMPING

Friday 12:00 pm – Monday 12:00 pm

NO PIPED WATER AVAILABLE

POTLUCK AND RAFFLE SATURDAY NIGHT

*Please bring a dish to share
and an item for the raffle*

Event Manager: Val Vagg Ride Managers: Brandy Burns & Jenn Garcia

Senior Judges: Diane Medlock and Kelly York

MURPHY RANCH TRAIL TRIAL

INFORMATION

Road 63, Brooks, CA

DIRECTIONS:

From Sacramento: I-5 North, take EXIT 541 for CA-16 West toward Esparto. Turn LEFT onto CA-16 West/Road 98. Go 2.9 mi and turn RIGHT at the Raley's shopping center onto CA-16 W. In 9.1 miles you will come to a traffic circle, take the 2nd exit onto CA-16. Go 2.8 miles and turn RIGHT at the stop light onto Yolo Ave/CA-16. In ½ mile (just after the Ace Hardware), turn LEFT to continue on CA-16/Woodland Ave. Continue on CA-16 for 14 miles. Turn LEFT onto Road 63. The ranch is at the end of this road, approximately ½ mile.

From Bay Area: Take I-80 East to I-505 North. Take EXIT 21 toward Esparto. Turn LEFT onto CA-16 West. At the traffic circle, take the 2nd exit onto CA-16. Go 2.8 miles and turn RIGHT at the stop light onto Yolo Ave/CA-16. In ½ mile (just after the Ace Hardware), turn LEFT to continue on CA-16/Woodland Ave. Continue on CA-16 for 14 miles. Turn LEFT onto Road 63. The ranch is at the end of this road, approximately ½ mile.

From Lake County or North of Williams: Take CA-20. At the CalFire Station, turn onto CA-16 E. Continue on CA-16 E for 21 miles. Turn RIGHT onto Road 63. The ranch is at the end of this road, approximately ½ mile.

CAMPING

Camping is \$15/night/rig. You may come in at 12:00 pm on Friday and leave by 12:00 pm Monday. There is no piped water available for people or horses so please make sure to bring water for yourself and your animals. You will need to cross a seasonal creek to get to the camping area. Rigs over 40 ft not recommended. No campfires. Propane fire rings are ok. Portable corrals will be needed. No trees available for high lining. Port-a-Potties available. Smoking allowed in your own rig/campsite only.

RANCH DETAILS

Cellular service is decent. This is a working cattle ranch. Cows may be in the pastures where we will be riding and camping. Some parts of the trail may be rutted with cattle tracks. Terrain is rolling, oak studded hills, with rocky creeks, and reservoirs. Expect some moderate climbs on single track trail and fire roads. Dogs must be on leash. No dogs in awards/dining/main administration areas.

SATURDAY NIGHT EVENTS

Potluck dinner for all on Saturday. Please bring a dish to share. Region 3 will provide plates, utensils and napkins. Bring your own chairs and drinks. We will also have a raffle. Please bring a donation for the raffle.

REGISTRATION AND RIDE OUT TIMES

Registration will open at 8:00 am on Saturday and Sunday mornings. Please check in to receive your rider number and ride out time. First rider will be at 9:30. Heavy rain just prior to event could cause it to be cancelled. No rain date scheduled

LIMITED TO 50 RIDERS EACH DAY – GET YOUR ENTRIES IN EARLY

Event Manager: Val Vagg (916) 812-4587

Ride Managers: Brandy Burns (530) 867-0197 & Jenn Garcia (916) 996-1569



Murphy Ranch Trail Trials

March 28-29, 2026



A Trail Trials consists of a ride with approximately 10-12 judged natural obstacles that appear along a trail of several miles in parks or private property. This is not an arena event! Entries limited to 50 riders.

Rider: _____ Horse: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact: _____ Phone: _____

Are you a CSHA Member? _____ Are you a TT program member? _____ Region: _____

DIVISION (Circle One)

NOVICE INTERMEDIATE ADVANCED

AGE CATALOG (Circle One)

JUNIOR ADULT (18-59) SENIOR

Date of Birth as of January 1, 2026

Select Ride Out Time (approximate time, verify when checking in at event)

9:30 9:45 10:00 10:15 10:30 10:45 11:00 11:15 11:30

Friends you are riding with: _____

Entry Fees:

Competitive Rider	Saturday	\$50	\$_____
	Sunday	\$50	\$_____
Junior Rider***	Saturday	\$25	\$_____
	Sunday	\$25	\$_____
Schooling Rider (judged, no awards)	Saturday	\$25	\$_____
	Sunday	\$25	\$_____
Companion Rider (trail ride, no obstacles)	Saturday	\$15	\$_____
	Sunday	\$15	\$_____
Camping Fee (per rig on the property) Fri-Sat-Sun		\$15/day	\$_____
Drug Fee for weekend			\$ 14.00

TOTAL FEES: \$_____

If you are a junior rider, give the name of your responsible adult _____

Juniors (17 & Under) must be accompanied by an adult rider throughout the ride. Helmets are required for junior riders.

LIMITED TO 50 RIDERS EACH DAY

Cancellations will be accepted. Just call to cancel and we will destroy your check.

Mailed registrations must be received by **3/20/2026**

Heavy rain just prior to event could cause it to be cancelled. No rain date scheduled.

Mail to: Valerie Vagg, 6618 Wisconsin, Arbuckle, CA 95912 Checks payable to: CSHA Region 3

Questions: Brandy Burns (530) 867-0197, Jenn Garcia (916) 996-1569

RELEASE, WAIVER OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

I, _____ ("Participant") on behalf of myself, my heirs, personal representative(s) and/or assigns, do hereby acknowledge that I have voluntarily sought to participate in various activities (which may include, without limitation, driving upon, hiking, walking, riding horses and/or other activities (the "Activities") in, on or near the property located in the County of Yolo and in or near the area known as Brooks, California and owned by the Bob J. Murphy and Victoria D. Murphy Trust (the "Property"), and I hereby acknowledge and unequivocally state that (A) I AM AWARE THAT THESE ACTIVITIES IN, ON OR NEAR THE PROPERTY MAY INCLUDE INHERENT RISKS DUE TO BEING OUTDOORS, WHICH INCLUDE NATURALLY OCCURRING HAZARDS SUCH AS UNEVEN TERRAIN, ROCKS, HOLES, WATER, ENCOUNTERING DOMESTIC AND WILD ANIMALS AND OTHER HIDDEN HAZARDS, AND (B) I AM AWARE THAT THESE ACTIVITIES ARE HAZARDOUS ACTIVITIES THAT CARRY CERTAIN INHERENT RISKS THAT CANNOT BE ELIMINATED REGARDLESS OF THE CARE TAKEN TO AVOID INJURIES. THE SPECIFIC RISKS VARY FROM ONE ACTIVITY TO ANOTHER AND I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

I HEREBY UNEQUIVOCALLY STATE THAT:

- (1) I have read the previous paragraph and I know, understand and appreciate that these and other risks are inherent to the Activities. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.
- (2) I forever release, waive, discharge and covenant not to sue and do hereby forever hold harmless Bob J. Murphy, Victoria D. Murphy and the Bob J. Murphy and Victoria D. Murphy Trust, their family members and their respective heirs, employees, volunteers, agents and representatives or any related parties thereto (the "Indemnified Parties"), from any and all liability, actions, claims or demands that I, my spouse, assignee(s), heirs, employees, volunteers, agents and representatives now have or may have in the future, for injury, death or property damage or any other cause of action related to the Activities, the condition of the Property or any other matter in any way related thereto (including the negligence of the Indemnified Parties).
- (3) The undersigned further expressly agrees that this Release, Waiver of Liability and Assumption of Risk Agreement is intended to be as broad and inclusive as permitted by law of the State of California and that if any portion hereof is held invalid, it is agree that the balance shall, notwithstanding, continue in full force and effect.

I have read this Release, Waiver of Liability and Assumption of Risk Agreement, fully understand its terms and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing this agreement freely and voluntarily and intend this Agreement to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of Participant (or Guardian if under 18)

Print Name of Participant

Date



California State Horsemen's Association, Incorporated **RELEASE OF LIABILITY**

PARTICIPANT: _____ PHONE/Cell# _____

ADDRESS: _____

CITY: _____ ZIP: _____ STATE: _____

I acknowledge I am attending and/ or participating in an event which carries inherent risks of injury and/or damage to myself, my horse, and/ or my property. I knowingly assume all risks, whether known or unknown of these activities.

I hereby agree I will indemnify and hold harmless **California State Horsemen's Association, Incorporated**, or any of its agents and the land and business owners/controllers on whose property I participate from all liability for any act of negligence or want of ordinary care on the part of **CSHA, Inc** or any of its agents; to include actual attorney fees arising from any proceedings or lawsuits brought by or prosecuted on my behalf.

In consideration of my participation in events organized or sponsored by **CSHA, Inc**, I waive, release and discharge, their directors, officers, agents, and members, their representatives, heirs, executors and assigns from any, and all claims of liability for injury or damage to myself, my animals, or my property arising out of my participation; this is binding upon my executors, heirs and assigns.

I acknowledge that I have read this Release of Liability; know and understand its contents and the rules and requirements for CSHA events.

I, the undersigned parent or guardian of the above participant in consideration of my minor's attendance/ participation in the event, agree that the terms and conditions of this Release of Liability and understand the rules and requirements for CSHA events. This shall be binding as to damage or injury my minor, his/her animals or property arising out of his/her attendance/ participation in events. DOB for minors _____
Month Day Year

NAME: _____ TELEPHONE: (____) _____

ADDRESS: _____ CITY _____ ZIP _____

Signature: _____ Date: _____