



## Join the Osage Nation Historic Preservation Office

### 10<sup>th</sup> Annual Osage Heritage Sites Visit 2026:

### Osage Four Corners



*Our mission is to preserve, maintain, and revitalize the culture and traditions of the Osage Nation. The program focus is to identify, document, protect, and preserve archaeological and historic Osage sites and graves in Osage County and our ancestral territory. The overarching goal of the program is to meet the cultural preservation needs voiced by the Osage people.*

The Osage Nation Historic Preservation Office (ONHPO) would like to provide constituents with the opportunity to visit important Osage heritage sites at the Osage Four Corners. We will begin our trip on Monday, April 20, 2026 and return to Pawhuska on Friday, April 24, 2026. The ONHPO will provide meals, lodging, and transportation. Constituents will need to secure their own travel to and from Pawhuska, Oklahoma to attend. This is both an indoor and outdoor event. Some activities will require walking through fields, up inclines, and using outdoor stairs; due to the nature of this trip, the ONHPO cannot provide ADA accessibility. Please bring weather appropriate clothing and shoes for hiking in spring weather. We look forward to you joining us!

For questions or concerns regarding the sites visit, please contact:

Benjamin Bressoud  
Archaeologist  
(918) 287-0017

[HistoricPreservation@osagenation-nsn.gov](mailto:HistoricPreservation@osagenation-nsn.gov)

## Registration

Registration will open February 2<sup>nd</sup> at 9:00 am and close February 6<sup>th</sup>, 2026 at 4:30 pm. There will be NO onsite or early registrations. Registration is limited to the first 20 applicants on a first come first serve basis with preference given to people who have never attended a trip before. Cancellations must be completed at least 72 hours prior to departure time.

NOTE: Each person attending needs to turn in a completed registration packet. If you are trying to attend with a family member, sibling, spouse, or friend please turn the completed registration packets in together at the same time. This allows for a better chance of attendance together.

NOTE: Once registration ends, applicants will be contacted via email or phone by ONHPO staff to be informed if they have been accepted to attend the trip or not. Those that were not initially accepted will be given the choice to be placed on a waitlist in the event of participant cancellations.

### Eligibility

- You must be Osage and provide an Osage Membership Card number.
  - Spouses will be allowed if accompanied by an Osage Citizen and a registration packet has been completed and submitted for the spouse also. Please turn in both completed registration packets at the same time.
- You must be age 18 or older to attend.
- No pets are allowed.
- Application must be complete in order to be accepted. Incomplete applications will not be counted as submitted on time.

### Important Dates to Remember

Registration opens: Monday, February 2<sup>nd</sup>, 2026, 9:00 am.

Registration closes: Friday, February 6<sup>th</sup>, 2026, 4:30 pm.

Orientation Meeting: To be determined

Departure: Monday, April 20, 2026 at 9:00 am.

Location: Osage Nation Civic Center  
1449 W Main St, Pawhuska, OK 74056

Return: Friday, April 24, 2026 in the afternoon.

Location: Osage Nation Civic Center  
1449 W Main St, Pawhuska, OK 74056

**Please return this and the following pages to:**

**By Mail:**

Osage Nation Historic Preservation Office  
ATTN: Benjamin Bressoud  
627 Grandview Avenue  
Pawhuska, OK 74056



**In Person:**

Osage Nation Historic Preservation Office, 2<sup>nd</sup> floor  
100 W. Main Street  
Pawhuska, OK 74056

**Or, by Fax or E-mail:**

(918) 287-0017  
[benjamin.bressoud@osagenation-nsn.gov](mailto:benjamin.bressoud@osagenation-nsn.gov)

For Office Use Only:

App Received \_\_\_\_\_

**Registration Form:**

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Last Name	First Name	MI	ON Membership Number
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Address	City	State
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Phone #	E-mail Address
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**T-Shirt Size (Please circle):** Small Medium Large X-Large XX-Large XXX-Large

Emergency Contact Information: Please list two contacts

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Name	Phone #	Relationship
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Name	Phone #	Relationship
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**Will you be sharing a room with another participant?**    \_\_\_\_\_ Yes    \_\_\_\_\_ No

Name of roommate: \_\_\_\_\_

*If you are sharing a room with another participant they have to also submit a registration form.*

**WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT**

1. In consideration for participating in the Osage Heritage Site Visit: Osage Four Corners, I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE, the Osage Nation, their officers, agents, servants, or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loses, damage, or injury, including death, that may be sustained by me, or any of the property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participating in such activity, or while in, on, or upon the premises where the activity is being conducted.
  
2. I am fully aware of the unusual risks involved and hazards connected with this activity, including but not limited to risks related to travel and participating in outdoor activities. I hereby elect to voluntarily participate in said activity with full knowledge that said activity may be hazardous to me and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH that may be sustained by me, or any loss or damage of property owned by me, as a result of being engaged in such activity, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE.
  
3. I further AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage or costs, including court costs and attorney fees, that may incur due to my participation in said activity, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise.
  
4. It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-named RELEASEES.
  
5. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the Osage Nation. Participant hereby expressly consents and submits to the exclusive jurisdiction of the Osage Nation Trial Court. Nothing in this Agreement shall be construed to waive the sovereign immunity of the Osage Nation.
  
6. IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same.

Signed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

**PARTICIPANT**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

**Medical Waiver, Liability & Consent**

**Medical Waiver**

I \_\_\_\_\_ *will not* hold the Osage Nation Historic Preservation Office liable for any accidents that may occur while attending the “Osage Heritage Sites Visit: Osage Four Corners” from Monday, April 20, 2026 to Friday, April 24, 2026, including but not limited to risks related to traveling and outdoor activities.

**Liability – please initial.**

\_\_\_\_\_ I *will not* hold the Osage Nation responsible for any damage or loss of property.

**Consent – please initial.**

\_\_\_\_\_ I grant to the Osage Nation, its representatives and employees, the right to take photographs of me and my property in connection with the above-identified event. I authorize the Osage Nation, its assignees and transferees to copyright, use and publish the same in print and/or electronically.

\_\_\_\_\_ I agree the Osage Nation may use such photographs of me without my name and for any lawful purpose, including for example, such purposes as publicity, illustration, advertising, and Web content.

**I have read and understand the above:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**Please list any relevant medical conditions, allergies or medications. If none, please specify.**

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**Please list any dietary restrictions (e.g. vegetarian, vegan, celiac, alpha-gal). If none, please specify.**

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### **Ghost Tour Sign-Up**

#### **1886 Crescent Hotel Ghost Tour**

On Wednesday, April 22, 2026, the participants in the Osage Heritage Sites Visit will be staying at the 1886 Crescent Hotel and Spa, in Eureka Springs, Arkansas. An optional component of the stay at this hotel is a Ghost Tour of the hotel itself, taking place in the evening. If you are interested in participating in this Ghost Tour in the event that you are chosen to be a part of the Osage Heritage Sites Visit, please check the box below.

For more information about the ghost tour, you can visit the hotel website at the following link:

<https://crescent-hotel.com/things-to-do/ghosts/>

If I am chosen, I would like to participate in the 1886 Crescent Hotel Ghost Tour