WASHINGTON, D.C

Classic Tours, Inc.
Student Travel Specialists
3714 CR 40A, Auburn, IN 46706
P. 260-833-4471
www.ClassicToursInc.com

A city your child has read about and seen in pictures from the time they entered school. However, no written word or picture can have the learning potential of actually visiting this historic city.

Dear Jennings County Students and Parents:

This year we will be offering a trip to Gettysburg and Washington, D.C. for grade students and their parents. Classic Tours of Auburn will be making the arrangements for us. The trip will be chaperoned by teachers and other adults as needed.

We will depart from Jennings County Middle School the evening of Wednesday, May 12 via motor coach. We will travel to Washington by way of Gettysburg and arrive at our hotel Thursday evening. We will leave Washington the evening of Saturday, May 15, and arrive back at Jennings County Middle School early the next morning, Sunday, May 16.

Our meals will be at large food courts and buffet style restaurants. All meals are included.

The student cost is $1,071.00 per student and includes transportation, accommodations for two nights (quad occupancy), nine meals, sightseeing and admissions, evening activities and accident insurance ($2500.00). Adult prices are as follows: Quad occupancy: $1,087.00; triple occupancy: $1,120.00; double occupancy: $1,187.00; single occupancy: $1,386.00. These prices are based on a minimum of 35 participants per motor coach. If the number signed up for the trip falls below the minimum, an adjustment will have to be made in the trip cost or in the trip itself. ***** Adult occupancy requested is NOT guaranteed and depends on the number of adults registered. Each adult is responsible for finding roommates and contacting either Classic Tours or Mr. Tyler about their choice.***

Highlights of our trip will include a tour of the Gettysburg battlefield; a tour of the Capitol Hill; a night tour of the memorials; visits to Arlington National Cemetery and Mount Vernon in Virginia; the Smithsonian Institute museum complex and much more.

We are confident that a visit to Gettysburg and Washington, D.C. will provide a unique learning experience, as well as a valuable insight into our nation's history and government. If you have questions not answered by this letter or the enclosure, please feel free to contact us at school (ctyler@jcsc.org or tshoultz@jcsc.org).

To make reservations, complete the bottom of this form, detach and mail in the envelope provided with your $300.00 deposit to Classic Tours, Inc., 3714 CR 40A, Auburn, Indiana 46706. Please make all checks payable to Classic Tours, Inc.
For online registration, please visit, classictoursinc.com and click on "Find Your School".

Deadline for receipt of deposit is **JANUARY 14, 2027.** Payments may be made at any time with the final payment due **APRIL 1, 2027.** We recommend that you make reservations as soon as possible. **THE NUMBER OF RESERVATIONS ACCEPTED IS LIMITED BY BUS SIZE AND WILL BE BASED ON THE DATE DEPOSITS ARE RECEIVED. RESERVATION PRIORITY IS FOR STUDENTS. ADULTS MAY BE PLACED ON A WAITLIST.**

Sincerely,

Mr. Shoultz and Mr. Tyler

_____(detach)_____

Please print **JENNINGS COUNTY - WASHINGTON, D.C. – 2027**

Please check ☐ Student ☐ Adult (Adults only—requested occupancy – ☐ Quad ☐ Triple ☐ Double ☐ Single Requested occupancy is not guaranteed). Securing roommates is your responsibility and notification to Classic Tours is required

Name _____

Address_____ City_____ State_____ Zip_____

Parent's/Guardian's name_____

Email(trip use only)_____Phone ( )_____

I have read and understand the paragraphs in regard to Classic Tours, Inc. responsibility, cancellation policy and returned check fee located on reverse.

_____
Parent/Guardian/Adult participant signature

RETURN THIS FORM ALONG WITH YOUR CHECK OR MONEY ORDER TO CLASSIC TOURS
PLEASE SEE REVERSE FOR CREDIT CARD PAYMENT

Classic Tours, Inc. of Auburn, Indiana, the Tour Operator, its agents or employees, act as agents for passengers in all matters pertaining to transportation, admissions, hotel accommodations, meal arrangements, and sightseeing. Therefore, as agents they accept no responsibility in whole or in part for any delays, change of schedule or condition caused thereby, loss of or damage to baggage or any article belonging to the passenger, injuries to person or for any expenses of any kind or nature arising from any type of service booked through Classic Tours, Inc. The Tour Operator retains the right to cancel any trip without notice and in the event of unavailability to substitute hotels in similar categories.

A billing statement will be sent to each tour participant prior to departure. It will include notice of any balance due; name, address and telephone number of the hotel; general information covering luggage and dress; information regarding roommate selection; and a health information form and student responsibility agreement. Payments may be made at any time. Please include the students name and school name with any correspondence. There is a $15.00 return check fee.

CANCELLATION POLICY

If you find it necessary to cancel a reservation you need to notify BOTH Classic Tours, Inc. and the school. Cancellation to Classic Tours can be made by emailing info@ClassicToursInc.com.

SCHEDULE: (per reservation)

1. Until reservation and deposit due date - Lose nothing; full refund
2. From deposit due date until 30 days prior to departure - Lose $50 + any non-recoverable amounts.
3. 30 days or less prior to departure - Lose $100 + any non-recoverable amounts.

(Non-recoverable amounts may include but are not limited to: hotel costs, meal costs and admission costs.)

THE ABOVE SCHEDULE APPLIES TO INDIVIDUAL CANCELLATIONS MADE BY PARENTS/GUARDIAN, TRIP SPONSOR OR SCHOOL AND GROUP CANCELLATIONS MADE BY CLASSIC TOURS, THE TRIP SPONSOR OR SCHOOL. THIS SCHEDULE ALSO APPLIES TO GROUP CANCELLATION DUE TO ACTS OF GOD OR CIRCUMSTANCES BEYOND THE CONTROL OF JENNINGS COUNTY MIDDLE SCHOOL OR CLASSIC TOURS.

For online registration please visit ClassicToursInc.com and click on "Find Your School".

TO PAY BY CREDIT CARD PLEASE FILL OUT THE INFORMATION BELOW

Please print

Name_____
AS IT APPEARS ON CARD

Billing address_____

City_____State_____Zip_____

Card number |____|____|____|____| - |____|____|____|____| - |____|____|____|____| - |____|____|____|____|

Security code |____|____|____|
Located on reverse

Expiration date |____|____| / |____|____|
m m y y

Amount to charge |____|,|____|____|____|.|____|____| Signature_____