



WASHINGTON, D.C

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 Lewis Cass Students and Parents:

This year I will be offering a trip to Gettysburg and Washington, D.C. for eighth grade students. 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 Lewis Cass Jr. High School the evening of Tuesday, October 13 via motor coach. We will travel to Washington by way of Gettysburg and arrive at our hotel Wednesday evening. We will leave Washington the evening of Friday, October 16, and arrive back at Lewis Cass Jr. High School early the next morning, Saturday, October 17.

Our meals will be at large food courts and buffet style restaurants. You will be responsible for all meals except for breakfast at the hotel on Thursday and Friday.

The student cost is \$946.00 per student and includes transportation, accommodations for two nights (quad occupancy), two meals, sightseeing and admissions, evening activities and accident insurance (\$2500.00). Adult prices are as follows: Quad occupancy: \$956.00; triple occupancy: \$988.00; double occupancy: \$1,052.00; single occupancy: \$1,243.00. These prices are based on a minimum of 25 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. ****ADULTS WISHING TO ATTEND MUST CONTACT MR. YOUNG PRIOR TO REGISTERING FOR SCHOOL APPROVAL. 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. Young 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.

I am 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 me at school (youngd@lewiscass.net).

To make reservations, complete the bottom of this form, detach and mail in the envelope provided with your \$250.00 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 **JUNE 25, 2026**. Payments may be made at any time with the final payment due **SEPTEMBER 3, 2026**. I 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. Young

(detach)

Please print

LEWIS CASS - WASHINGTON, D.C. – 2026-Fall

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:

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 LEWIS CASS JR. HIGH 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 | ____|____|____| _____ Expiration date | ____|____| / |____|____|
Located on reverse m m y y

Amount to charge | ____|,|____|____|____|.|____|____| Signature _____