

SAVANNAH & CHARLESTON

April 18 - 26, 2020



INCLUDED IN YOUR TOUR:

- 4 Seasons Tour Director Cindy Peterson
- 8 nights accommodations
- Deluxe motorcoach transportation
- 14 Meals: 8 breakfasts, 6 dinners
- Guided Trolley Tour of Savannah, followed by Hop-on/Hop-off privileges
- Evening show at Famous Savannah Theatre
- Guided tour of St. Simons Island
- Guided Tram Tour of Jekyll Island
- Visit historic Charleston
- Harbor Cruise in Charleston
- Luggage handling for 1 suitcase per person

DAY 1 Saturday, April 18 - Albert Lea, MN to St. Louis, MO

Today we set out for our journey to Savannah and Charleston. This evening we will stay in our en route hotel.

DAY 2 (B,D) Sunday, April 19

After breakfast we will enjoy a visit to the Missouri Civil War Museum in St. Louis. Tonight we will enjoy an included dinner before relaxing in our hotel for the evening.

DAY 3 (B,D) Monday, April 20

After breakfast we will continue our journey to Savannah. We will enjoy an included dinner this evening and check into our Savannah hotel for a three-night stay.

DAY 4 (B,D) Tuesday, April 21

Today we begin our tour of Savannah and Charleston. After breakfast this morning we will take a guided trolley tour of Savannah where we will see extraordinary architectural marvels, beautiful oak-lined streets and lovely town squares. We will then have Hop-on/Hop-Off privileges on the Trolley for the rest of the day and enjoy free time on historic River Street. Tonight we will enjoy an included dinner with entertainment before returning to our hotel.

DAY 5 (B,D) Wednesday, April 22

Following breakfast we will depart for a guided tour of St. Simons Island. We will take a stroll among moss-draped oaks or shop at the interesting boutiques and specialty shops in the historic area. Later we will enjoy a guided tram tour of Jekyll Island where we will see how the nation's wealthiest citizens like J.P. Morgan and William Rockefeller lived and played. After an included dinner we will enjoy an evening show at the Famous Savannah Theater before returning to our hotel.

DAY 6 (B,D) Thursday, April 23

We are off to Charleston this morning to visit "America's Favorite City." Our day will include a cruise as we enjoy the beauty of the Charleston harbor and see over 75 landmarks and points of interest!

DAY 7 (B,D) Friday, April 24

Today we will make a stop at the South Carolina State Museum in Columbia, SC. After an included dinner we will check into our en route hotel.

DAY 8 (B) Saturday, April 25

Today we will be treated to the Willie Nelson & Friends Museum and General Store in Nashville, TN before continuing our travels and checking into our en route hotel.

DAY 9 (B) Sunday, April 26

Today we will continue our journey home reflecting on the great time we had making memories and new friends!



Prices Per Person

	<u>Double</u>	<u>Single</u>	<u>Triple</u>
Tour Cost	\$1699.00	\$1999.00	\$1599.00
Insurance Cost	\$122.33	\$143.93	\$115.13
Total	\$1821.33	\$2142.93	\$1714.13

DEPOSIT & FINAL PAYMENT:

A deposit of \$300.00 per person will be required at the time of booking. Final payment will be due Feb 1st, 2020. Any reservations made within 60 days will require full payment. Deposits are fully refundable prior to 60 days before departure.

CANCELLATION & REFUNDS:

CANCELLATION RECEIVED:

From time of deposit to 61days.....No Penalty — Total Refund
 From 60 days to 45 days prior.....\$300.00 deposit
 From 44 or less prior.....No Refund

These tours are operated by 4 Seasons Travel, Inc., (d.b.a.4 Seasons Vacations, Inc.) P.O. Box 851, Albert Lea, MN 56007 (hereafter 4 Seasons) and acts only as agent for tour members in arranging room accommodations, transportation, sightseeing, admissions and restaurants. 4 Seasons reserves the right in its sole discretion to make itinerary changes and is not responsible to any person for expense, loss of time or money or other circumstances resulting from a change in itinerary or change of tour arrangements made by it for tour members. Rates quoted are based upon tariffs and exchanges current at the time of printing and are subject to change. 4 Seasons reserves the right to decline or to accept any person as a tour member of any tour at any time. 4 Seasons is not responsible for any loss or damages to personal property or for injuries, expenses or damages whatsoever incurred or claimed by tour members. 4 Seasons reserves the right to cancel a tour at its discretion should it become necessary and all monies would be refunded, thus releasing 4 Seasons from any further obligation



GROUP TOURS AND VACATIONS FOR PEOPLE GOING PLACES

CONTACT US

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507-373-1850 (Fax)

travel1@4seasonstravel.net (Email)

www.4-seasonsvacations.com(Website)

TRAVEL GUARD INSURANCE

Cover your investment from those unforeseen circumstances that may arise before or during your trip. The Deluxe Group Plan provides valuable coverage at an affordable price and includes a waiver of Pre-existing Medical Condition Exclusion if insurance is purchased with Initial Trip Payment.

MAXIMUM LIMIT

Trip Cost
 125% of Trip Cost
 \$500
 \$500
 \$1,000
 \$500
 \$20,000
 \$50,000
 \$50,000
 Included
 Included
 Included

COVERAGE PER PERSON

Trip Cancellation
 Trip Interruption
 Trip Delay (Maximum \$150 per day)
 Missed Connection
 Baggage & Personal Effects
 Baggage Delay
 Accident Sickness Medical Expense
 Emergency Evacuation
 Accidental Death & Dismemberment
 Travel Medical Assistance
 Worldwide Travel Assistance
 Live Travel Emergency Assistance

Registration is easy. Simply complete this form and submit with \$300 per person deposit.
 If purchasing insurance, insurance payment is due at the time of deposit.

4 Seasons Vacations
 130 W. Clark Street
 Albert Lea, MN 56007

I am purchasing insurance

I am declining insurance

Signature: _____

**We accept
 Visa/MasterCard
 American Express/Discover**

**Savannah &
 Charleston, SC
 April 18 - 26, 2020**

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (Home) _____ (Cell) _____

Gender: _____ M _____ F Date of Birth: _____

Emergency Contact: _____

Phone: _____ Relationship _____

Room Accommodations: _____ Non-Smoking _____ 1 Bed
 _____ Smoking _____ 2 Beds

Name on Name Tag: _____

Email: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (Home) _____ (Cell) _____

Gender: _____ M _____ F Date of Birth: _____

Emergency Contact: _____

Phone: _____ Relationship _____

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