

NYC Spectacular

November 12-16, 2024

4 Seasons Tour Director:

Tammi Haney



INCLUDED:

- Roundtrip Delta flights
- 4 nights at the fabulous Millennium Times Square
- 6 Meals: 4 breakfasts, 2 dinners
- Broadway Musical
- Statue of Liberty/Ellis Island
- Tour of New York City
- 911 Memorial & Museum
- Radio City Music Hall: The Rockettes Christmas Spectacular



Day 1 Tuesday, November 12

Millennium Times Square , New York City (4 Nights)

We fly to New York City, arriving in the afternoon. Evening on your own to explore **THE BIG APPLE!**

Day 2 Wednesday, November 13 (B)

This morning following breakfast our local step on guide will join us for an informative tour of **Manhattan Island**. Lunch on your own during the tour. Tonight take in an optional Broadway play and enjoy a fabulous dinner on your own in **Times Square**.

Day 3 Thursday, November 14 (B,D)

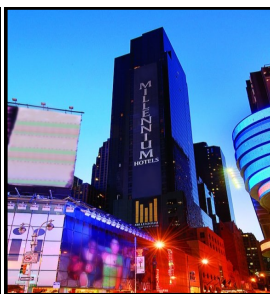
If you'd like to get up early, it's worth a walk over to **"Good Morning America"** to see the show being taped live (optional). Depart for the Statue of Liberty and Ellis Island Tour. Then return to our hotel this afternoon in time for an included dinner. Tonight we will see a **Broadway Musical**. Revel in the sights and sounds of a show right on Broadway!

Day 4 Friday, November 15 (B,D)

After breakfast join your Tour Director for the **911 Memorial and Museum** with **One World Observatory**, located at **One World Trade Center**. This will be a somber time as you pay Tribute to those lost in the terrorist attacks. After an included dinner, we will enjoy the **Rockettes Christmas Spectacular at Radio City Music Hall!**

Day 5 Saturday, November 16 (B)

Following check-out at the hotel we will depart back to LaGuardia International Airport for our return flight home with wonderful memories of our **New York City SPECTACULAR!**



PRICE PER PERSON

| | <u>Double</u> | <u>Single</u> | <u>Triple</u> | <u>Quad</u> |
|-----------|---------------|---------------|---------------|-------------|
| TOUR COST | \$2,699.00 | \$3,299.00 | \$2,599.00 | \$2,499.00 |
| INSURANCE | 194.33 | 237.53 | 187.13 | 179.93 |

(Airfare included)



Departure Flight:

Depart Minneapolis.....10:35 AM
Arrive LaGuardia Airport.....2:19 PM

Return Flight:

Depart LaGuardia Airport.....11:10 AM
Arrive Minneapolis.....1:17 PM

(Air schedule subject to change)

DEPOSIT & FINAL PAYMENT:

A deposit of \$400.00 per person will be required at the time of booking. Final payment will be due August 9, 2024. Any reservations made within 90 days will require full payment.

CANCELLATION & REFUNDS:

CANCELLATION RECEIVED:

From time of deposit to 91days.....Refundable
From 90 or less.....100% Non Refundable

Registration is easy:

Complete the form below and submit with \$400.00 deposit . Also if purchasing insurance, insurance payment needs to be at time of deposit.

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 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

CONTACT US

507-373-4705

507-373-1850 (fax)

travel1@4seasonstravel.net (email)

www.4-seasonsvacations.com (website)



4 Seasons Vacations

636 E. 11th Street

Albert Lea, MN 56007

☐ I am purchasing insurance

☐ I am declining insurance

We Accept
American Express
Mastercard
Discover
Or Visa

NYC Spectacular

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Signature _____

Name: _____
(as it appears on passport)

Address: _____ City: _____

State: _____ Zipcode: _____ Phone: () _____

Cell Phone: () _____

Passport #: _____ Date of Issue: _____

Expiration Date: _____ Citizenship: _____

Gender: _____ M _____ F Date of Birth: _____

Emergency Contact: _____

Phone: () _____ Relationship: _____

Air Seat Request: _____ Aisle _____ Window _____

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

Delta Frequent Flyer# _____

Name on Name tag _____

Email _____

Name: _____
(as it appears on passport)

Address: _____ City: _____

State: _____ Zipcode: _____ Phone: () _____

Cell Phone: () _____

Passport #: _____ Date of Issue: _____

Expiration Date: _____ Citizenship: _____

Gender: _____ M _____ F Date of Birth: _____

Emergency Contact: _____

Phone: () _____ Relationship: _____

Air Seat Request: _____ Aisle _____ Window _____ Next

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

Delta Frequent Flyer# _____

Name on Name tag _____

Email _____