



HAMPDEN TOWNSHIP PARKS & RECREATION A COLONIAL WILLIAMSBURG CHRISTMAS WILLIAMSBURG, VA

Friday, December 3 – Monday, December 6, 2027

YOUR COLONIAL WILLIAMSBURG TOUR INCLUDES

- Round-trip transportation via private motorcoach equipped with reclining seats and restroom.
- Three (3) nights accommodations at the Williamsburg Lodge, Williamsburg, VA. Part of the Marriott Autograph Collection, this historic hotel offers a prime location for accessing the Historic Area, Merchants Square and more!
- Five (5) included meals: three (3) breakfasts and two (2) dinners.
- Admission ticket to the Colonial Williamsburg Historic District for the duration of your stay at Williamsburg Lodge, including access to select historic buildings and exhibits. From 1699 to 1780, Williamsburg served as the capital of Virginia. Today, Colonial Williamsburg features more than 500 restored buildings and 90 acres of gardens, where historic sites bring to life the people and ideas that shaped the founding of American democracy.
- Guided tour of the Historic District featuring key sites such as the Governor's Palace, along with historic trade shops and other notable buildings (subject to availability). Enjoy free time to visit the Abby Aldrich Rockefeller Folk Art Museum and DeWitt Wallace Decorative Arts Museum.
- Grand Illumination ~ Experience Colonial Williamsburg's most festive holiday tradition, featuring live musical performances, costumed interpreters, and spectacular fireworks illuminating the Historic Area.
- Guided tour of the Jamestown Settlement.
- Guided tour of the American Revolution Museum at Yorktown.
- Baggage handling for one (1) suitcase per person.
- A portion of the proceeds benefit Hampden Township Parks & Recreation.
- Services of a Boscov's Travel Tour Director.
- All taxes and gratuities for tour features including the gratuities for your tour director, local guides, and motorcoach driver.

Depart Hampden Township, Mechanicsburg, PA at 9:00 am, and approximate return by 5:00 pm

COST PER PERSON

DOUBLE OCCUPANCY	SINGLE OCCUPANCY
\$1,579	\$2,262



ITINERARY

Day One – Departing from Hampden Township, Mechanicsburg, PA this morning, you'll travel south to historic Williamsburg, Virginia. Rest and meal stops (at your own expense) will be made en route. Upon arrival, you will check into your hotel, the Williamsburg Lodge, your home for the next three (3) nights. After check-in, you'll have time to freshen up before enjoying dinner at a local restaurant.

Meals: Dinner

Day Two – After breakfast at the hotel this morning, you'll board your motorcoach and depart for a guided tour of Colonial Williamsburg with a local step-on guide for an engaging introduction to Colonial Williamsburg. Enjoy a narrated overview as your guide shares the history, layout, and significance of this restored 18th-century capital. Upon arrival in the Historic Area, your group will continue with a guided walking tour, allowing for a closer look at the iconic buildings such as the Governor's Palace, streets, and sites that shaped early American life. Following the tour, enjoy lunch (on own) and free time to further explore the Historic Area at your own pace, visit the Abby Aldrich Rockefeller Folk Art Museum or the DeWitt Wallace Decorative Arts Museum, or browse the shops of Merchants Square.

This afternoon, return to the hotel to relax and freshen up before dinner. This evening, enjoy dinner at the hotel before departing for Grand Illumination. Experience one of Williamsburg's most beloved holiday traditions, featuring festive music, costumed interpreters, and spectacular fireworks throughout the Historic Area. Return to the hotel following the festivities.

Meals: Breakfast, Dinner

Day Three – After breakfast at the hotel, you'll depart for a guided visit to the Jamestown Settlement. Discover the story of America's earliest English settlers through immersive exhibits, outdoor living-history areas, and full-scale re-creations of the ships that brought colonists to Virginia. Following your visit, enjoy lunch (on own) onsite before boarding your motorcoach and continuing to the American Revolution Museum at Yorktown. Here, you'll enjoy a guided tour and explore exhibits and living-history experiences that bring to life the nation's founding and the decisive victory at Yorktown. Return to the hotel late afternoon. The remainder of the evening is at leisure, with dinner on your own to enjoy at the hotel or nearby restaurants.

Meals: Breakfast

Day Four – After breakfast at the hotel and check-out, you'll bid farewell to Williamsburg and begin your journey home. Rest and meal stops (at your own expense) will be made en route.

Meals: Breakfast



TERMS AND CONDITIONS

IMPORTANT GENERAL INFORMATION: The rate is based on a minimum of 30 paying participants.

PAYMENT INFORMATION: Deposit of \$250 per person is due with the reservation form to secure individual reservations. Final payment is due by **September 3, 2027**.

CANCELLATIONS: Regardless of reason, cancellations are subject to the following assessments: For cancellations from **September 4, 2027 to October 3, 2027** a cancellation fee of **\$250 will be assessed**. For cancellations on **October 4, 2027 through November 2, 2027**, a cancellation fee of **50% of the tour cost** will be assessed. For cancellations on **November 3, 2027 or later**, a cancellation fee of **100% of the tour cost** will be assessed. No refund will be given for No Shows. Travel Protection Plans are available to cover penalties due to covered reasons.

OPTIONAL TRAVEL PROTECTION PLAN: Please refer to the Travel Protection Pricing Grid attached to this flyer. Once purchased, Travel Protection Plans are **non-refundable**.

TOUR COSTS: It is assumed that each individual will use all portions of the tour; there is no refund for unused transportation, tickets, sightseeing, or meals.

CHANGES IN ITINERARY: None are anticipated, but we reserve the right to make such changes if they are for the comfort of our guests or due to conditions beyond our control.

TAXES AND GRATUITIES: Your tour includes all necessary taxes and gratuities for the included features, including the gratuity for the tour director, motorcoach driver and local guide.

LIABILITIES: Boscov's Travel expressly reserves the right to withdraw any tour or make any change in the tour that may become necessary, with or without prior notice. No carrier with whom transportation shall be arranged in connection with the tour shall have or incur any responsibility to any person taking the tour except its liability as a common carrier. Neither the motorcoach company nor Boscov's Travel shall be held liable for the loss of any property or valuables left on the motorcoach. Furthermore, anything left on board shall be considered left at the owner's risk. No employee of the motorcoach company or Boscov's Travel may say anything to alter the liability of the foregoing for the motorcoach company or Boscov's Travel.

RESPONSIBILITIES: Boscov's Travel, Inc. acts solely in the capacity of agent on behalf of its patrons, arranging transportation, accommodations, sightseeing, and other services, and, as such is not responsible for damage, loss, delay, injury, accidents, epidemics, pandemics, the spread of infectious diseases, quarantines or any other circumstances beyond our control or any act or default on the part of any company or person engaged in providing transportation, accommodations, sightseeing, or other services which are part of this tour.

070926 jw



RESERVATION FORM – HAMPDEN TOWNSHIP PARKS & RECREATION COLONIAL WILLIAMSBURG, DECEMBER 3 – 6, 2027

Send to: Boscov's Travel, Camp Hill Shopping Mall, 170 S. 32nd Street, Camp Hill, PA 17011. For further information, contact your Boscov's Travel Advisor by calling 717-763-1100 or emailing bostravcamphill@boscovs.com

____ A FULL deposit of **\$250 per person** is enclosed for ____ # of person(s).

____ I/We wish to add the **OPTIONAL TRAVEL PROTECTION PLAN** – Please refer to the Travel Protection Pricing grid attached to this flyer. **PLEASE NOTE: ONCE PURCHASED, TRAVEL PROTECTION BECOMES NON-REFUNDABLE**

TRAVELER #1 ____ DELUXE ____ CFAR (Cancel for Any Reason) Signature _____ Date _____

TRAVELER #2 ____ DELUXE ____ CFAR (Cancel for Any Reason) Signature _____ Date _____

I DECLINE Travel Protection Plan Signature #1 _____ Date _____

I DECLINE Travel Protection Plan Signature #2 _____ Date _____

#1 First Name _____ Middle Name _____ Last Name _____

Gender: ____ M ____ F Date of Birth: ____/____/____

Special requests (including but not limited to a CPAP machine, refrigerated medications, epi pen, assistance devices, oxygen, dietary restrictions, special services, etc.):

Address _____ City _____ State _____ Zip _____

Cell phone () _____ Email Address: _____

Emergency Contact Name: _____ Phone _____ Relationship _____

Your Emergency Contact **MUST** be someone **NOT** traveling with you

IMPORTANT: I have read and agree to the attached terms and conditions of the operator participant agreement and I authorize the use of my credit card if indicated as form of payment.

Signature _____

Date _____

____ I wish to use my ____ **BOSCOV'S CREDIT CARD**

____ **MASTERCARD**

____ **VISA**

CARD# _____ EXP: _____ SECURITY CODE: _____

____ I wish to pay by **CHECK** – please make it payable to **BOSCOV'S TRAVEL** CHECK # _____

#2 First Name _____ Middle Name _____ Last Name _____

Gender: ____ M ____ F Date of Birth: ____/____/____

Special requests (including but not limited to a CPAP machine, refrigerated medications, epi pen, assistance devices, oxygen, dietary restrictions, special services, etc.):

Address _____ City _____ State _____ Zip _____

Cell phone () _____ Email Address: _____

Emergency Contact Name: _____ Phone _____ Relationship _____

Your Emergency Contact **MUST** be someone **NOT** traveling with you

IMPORTANT: I have read and agree to the attached terms and conditions of the operator participant agreement and I authorize the use of my credit card if indicated as form of payment.

Signature _____

Date _____

____ I wish to use my ____ **BOSCOV'S CREDIT CARD**

____ **MASTERCARD**

____ **VISA**

CARD# _____ EXP: _____ SECURITY CODE: _____

____ I wish to pay by **CHECK** – please make it payable to **BOSCOV'S TRAVEL** CHECK # _____

PRIVATE





BOSCOV'S TRAVEL PROTECTION PLAN

SCHEDULE OF INSURANCE BENEFITS AND OTHER NON-INSURANCE SERVICES

Benefit	Maximum Benefit Amount
Trip Cancellation**	up to 100% of Trip Cost*
Trip Interruption**	up to 150% of Trip Cost*
Trip Delay - 6 hours	up to \$150 per day, to a maximum of \$750
Single Supplement	Included
Missed Connection	up to \$300
Medical Evacuation and Repatriation of Remains Benefit	up to \$250,000
Political or Security Evacuation and Natural Disaster Evacuation	up to \$150,000
Baggage and Personal Effects	up to \$1,000 (\$250 per article)
Baggage Delay - 12 hours	up to \$500
Accident & Sickness Medical Expense	up to \$100,000
Dental Expense sublimit	up to \$750
Non-Insurance Travel Assistance Services	Included

OPTIONAL UPGRADE BENEFITS - AVAILABLE FOR AN ADDITIONAL COST

Benefit	Maximum Benefit Amount
Cancel for Any Reason***	75% of Trip Cost*

Cost Of Trip per person	Rates per person	With CFAR***	Cost of Trip per person	Rates per person	With CFAR***
\$0-\$500	\$25.00	\$61.00	\$6,501-\$7,000	\$582.00	\$875.00
\$501-\$1,000	\$70.00	\$106.00	\$7,001-\$8,000	\$623.00	\$937.00
\$1,001-\$1,500	\$112.00	\$169.00	\$8,001-\$9,000	\$673.00	\$1,012.00
\$1,501-\$2,000	\$138.00	\$208.00	\$9,001-\$10,000	\$748.00	\$1,124.00
\$2,001-\$2,500	\$174.00	\$262.00	\$10,001-\$11,000	\$881.00	\$1,324.00
\$2,501-\$3,000	\$206.00	\$310.00	\$11,001-\$12,000	\$962.00	\$1,445.00
\$3,001-\$3,500	\$233.00	\$351.00	\$12,001-\$13,000	\$1,044.00	\$1,569.00
\$3,501-\$4,000	\$290.00	\$436.00	\$13,001-\$14,000	\$1,126.00	\$1,692.00
\$4,001-\$4,500	\$331.00	\$498.00	\$14,001-\$15,000	\$1,207.00	\$1,814.00
\$4,501-\$5,000	\$383.00	\$576.00	\$16,001-\$17,000	\$1,370.00	\$2,058.00
\$5,001-\$5,500	\$424.00	\$637.00	\$17,001-\$18,000	\$1,452.00	\$2,181.00
\$5,501-\$6,000	\$466.00	\$700.00	\$18,001-\$19,000	\$1,534.00	\$2,305.00
\$6,001-\$6,500	\$506.00	\$760.00	\$19,001-\$20,000	\$1,615.00	\$2,427.00

*Up to the lesser of the Trip Cost paid or the limit of coverage on Your confirmation of coverage

**\$500 Return air ticket cost only if \$0 Trip Cost displayed for Trip Cancellation on Your confirmation of coverage

***Must be purchased within 14 days of the date your initial trip payment or deposit is received. Additional terms apply. Not available to residents of New York. Trip Cancellation and Trip Interruption coverage only applies if trip is cancelled/interrupted by a covered peril.

General Exclusions and Limitations for Insurance Benefits

Unless otherwise shown below, these exclusions apply to You, Your Traveling Companion, or Family Member scheduled and booked to travel with You.

The following exclusion applies to the Trip Cancellation and Trip Interruption: We will not pay for any loss or expense caused due to, arising or resulting from a Pre-Existing Medical Condition, as defined in the plan.

The following exclusions apply to the Medical Expense benefits:

1. routine physical examinations or routine dental care;
2. traveling for the purpose or intent of securing medical treatment or advice;
3. Alcohol or substance abuse or treatment for the same;
4. Normal pregnancy (except Complications of Pregnancy) or childbirth, or elective abortion;
5. a Mental, Nervous or Psychological Condition or Disorder unless Hospitalized or Partially Hospitalized while the certificate is in effect;
6. Your participation in Adventure or Extreme Activities, riding or driving in races, or participation in speed or endurance competition or events, except as a spectator;
7. Your participation in an organized athletic or sporting competition, contest, or stunt under contract in exchange for an agreed-upon salary or compensation. This does not include athletes participating in exchange for a scholarship or tuition.

In addition to any applicable benefit-specific exclusion, the following general exclusions apply to all losses and all benefits. We will not pay for any loss or expense caused due to, arising or resulting from:

1. suicide, attempted suicide or any intentionally self-inflicted injury of You, a Traveling Companion, Family Member or Business Partner booked and scheduled to travel with You, while sane or insane;
2. being under the influence of drugs or narcotics, unless administered upon the advice of a Physician as prescribed;
3. activities, losses, or claims involving or resulting from possession, production, processing, sale, or use of marijuana, illegal drugs, alcohol or substances are excluded from coverage;
4. war or act of war, including invasion, acts of foreign enemies, hostilities between nations (whether declared or undeclared), or civil war;
5. the commission of or attempt to commit a felony or being engaged in an illegal occupation by You, a Traveling Companion, Family Member, or Business Partner;
6. directly or indirectly, the actual, alleged or threatened use, discharge, dispersal, seepage, migration, escape, release or exposure to any hazardous biological, chemical, nuclear radioactive weapon, device, material, gas, matter or contamination;
7. piloting or learning to pilot or acting as a member of the crew of any aircraft;
8. failure of any tour operator, Common Carrier, or other travel entity, person or agency to provide the bargained-for Travel Arrangements for reasons other than Financial Insolvency or Financial Default. Important: there is no coverage for losses due to, arising or resulting from the Financial Insolvency or Financial Default of Your Travel Supplier or any entity that sold, solicited, negotiated, offered or disseminated this certificate to You or Your Traveling Companion.

The plan also contains exclusions specific to Baggage and Personal Effects and Baggage Delay.

Pre-Existing Medical Condition Exclusion Waiver: The Pre-Existing Medical Condition Exclusion will be waived if you purchase the protection plan within 14 days of the date your initial trip payment or deposit is received and you are medically able and not disabled from travel at the time you purchase the plan, based on the assessment of a physician.

To purchase this plan, please talk to your Boscov's Travel Advisor.

This advertisement contains highlights of the plans developed by Travel Insured International, which include travel insurance coverages underwritten by United States Fire Insurance Company, Principal Office located in Morristown, New Jersey, under form series T7000 et al, T210 et al and TP-401 et al, and non-insurance Travel Assistance Services provided by C&F Services. The terms of insurance coverages in the plans may vary by jurisdiction and not all insurance coverages are available in all jurisdictions. Insurance coverages in these plans are subject to terms, limitations and exclusions including an exclusion for pre-existing medical conditions. In most states, your travel retailer is not a licensed insurance producer/agent, and is not qualified or authorized to answer technical questions about the terms, benefits, exclusions and conditions of the insurance offered or to evaluate the adequacy of your existing insurance coverage. Your travel retailer may be compensated for the purchase of a plan and may provide general information about the plans offered, including a description of the coverage and price. The purchase of travel insurance is not required in order to purchase any other product or service from your travel retailer. The cost of your plan is for the entire plan, which consists of both insurance and non-insurance components. While Travel Insured International markets the travel insurance in these plans on behalf of USF, non-insurance components of the plans were added to the plans by Travel Insured International, and Travel Insured International does not receive compensation from USF for providing the non-insurance components of the plans.