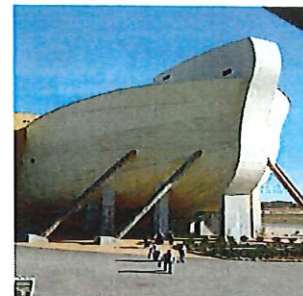


Arranged and conducted by:
BOB NEFF TOURS
1525 Oregon Pike, Ste. 2201
Lancaster, PA 17601
717.397.0000 800.848.1492

**THE CREATION MUSEUM
& ARK ENCOUNTER**
Calvary Chapel Chester Springs
September 12-15, 2022



Pick-up & Times

- Depart Calvary Chapel Chester Springs at 7:00 am
- Return to Calvary Chapel at 9:00 pm

Tour Cost (per person):

\$819 Double \$1,055 Single \$740 Triple \$701 Quad

Deposit per person: \$100 due at registration

Balance due on July 22, 2022

Make checks payable to Bob Neff Tours.

Tour Inclusions:

- Motorcoach transportation
- Meals: 9 meals (3 full breakfasts; 3 lunches; 3 dinner)
- Attractions as listed below
- Overnight accommodations – AAA 3 diamond hotel
- Hotel luggage handling
- Bob Neff Tours Tour Director

DAILY ITINERARY

MON, Sep 12 (Day 1) •Stop at **Flight 93 9/11 National Memorial** and the newly opened "Tower of Voices" near Shanksville, PA •Travel to Cincinnati, OH area, for dinner and overnight accommodations (D)

TUE, Sep 13 (Day 2) •Spend the day at the **Creation Museum**, Petersburg, KY, seeing Biblical history come alive, the Planetarium Experience is also included. •Lunch at the café-*included* •Overnight and light dinner *included* at your hotel (B, L, D)

WED, Sep 14 (Day 3) •Enjoy a day at the **Ark Encounter** in Williamstown, Kentucky, which was built according to the dimensions provided in the Bible for the vessel that survived the worldwide flood The Ark houses three stories of Biblical exhibits • Lunch at the café-*included* • Overnight and light dinner *included* at hotel (B, L, D)

THU, Sep 15 (Day 4) •Travel homeward, stopping at **Dickinson Cattle Company** in Barnesville, OH for lunch and a tour of the long-horn cattle ranch •Travel home with many great memories and friends we met on this four-day getaway (B, L)

----- ✂ -----(cut and return bottom portion)----- ✂ -----

Mail to: Bob Neff Tours
1525 Oregon Pike,
Suite 2201
Lancaster, PA 17601

THE CREATION MUSEUM & ARK ENCOUNTER
Calvary Chapel Chester Springs

September 12-15, 2022
(please ✓ preference below)

\$819 per person (Double) \$1,055 per person (Single) \$740 per person (Triple) \$701 per person (Quad)

Mr/Mrs/Miss _____
(first name, last name)

Address _____
(street address, R.D. #, Box #)

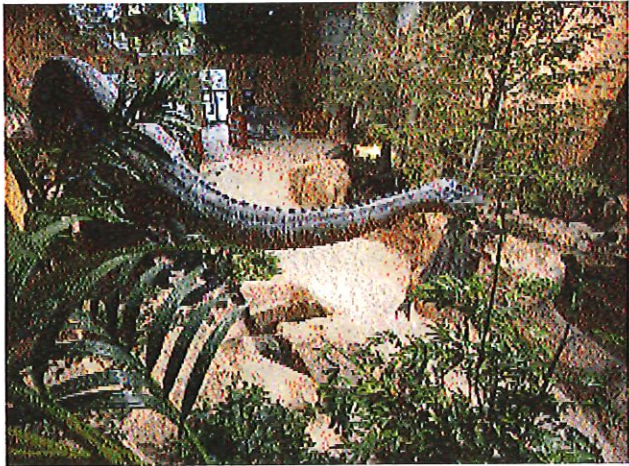
_____ (phone #)
_____ (city, state, zip code)

Enclosed amount \$ _____ check (payable to Bob Neff Tours)

(over please) → → → → →

RESPONSIBILITY - Bob Neff Tours, Inc., of Lancaster, PA, and Calvary Chapel of Chester Springs, Exton, PA, assume no responsibility or liability in connection with the services of any train, vessel, carriage, aircraft, motor or other conveyance which may be used wholly or in part, in performance of their duties to participants of this tour. Neither will they be responsible for any act, error, or omission, or for any injury, loss, accident, delay or irregularity which may be occasioned by reason of any defect in any vehicle or through neglect or default of any company or person engaged in conveying the passenger; or for any hotel proprietor, or for any other person engaged in carrying out the itinerary listed in this tour brochure. While no changes are anticipated in the published tour, the right is reserved to alter the itinerary for operational reasons but without deleting any of its components or substitute hotels where and when considered advisable for the comfort and welfare of the tour participants. Any additional expense incurred due to changes required owing to sickness, weather, strikes, war, quarantine or other causes shall be for the account of the tour participant.

CANCELLATIONS - For cancellations received after July 22, 2022, a charge of \$20.00 per person, per travel day, PLUS any expenses that cannot be recovered, will be made unless a substitute(s) can be found. **No refunds will be given to people who cancel off the tour within 48 hours of departure.** For all cancellations, if a substitute is found, a full refund will be made. If you wish to protect yourself from payment of a cancellation penalty due to sickness or death in the immediate family, we recommend that you purchase insurance to cover this loss. An insurance form will be sent to you if you request it.



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Roommate _____ Phone # _____
Emergency contact _____ Phone # _____

◆ **SPECIAL NOTES:** List any special requests.

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Lancaster, PA 17601**