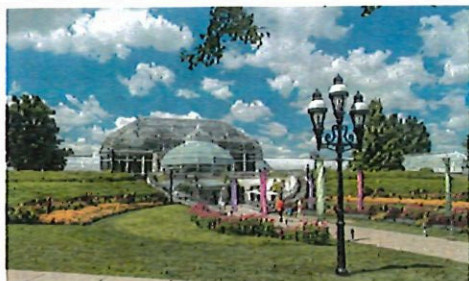


PITTSBURGH EXPRESS

CELEBRATE ONE BEAUTIFUL REGION

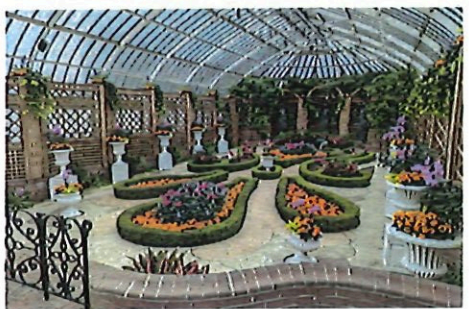
4 DAYS - 3 NIGHTS

JUNE 8 - 11, 2026



\$791 *double occupancy* **\$761** *triple occupancy*
\$1,090 *single occupancy* *All rates are per person*

Balance due by April 1, 2026
All non-members will incur an additional \$50 fee

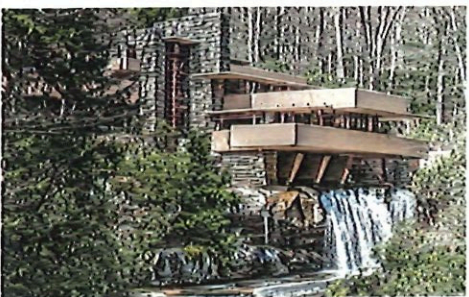


PACKAGE INCLUDES:

- * 3 Nights lodging
- * 3 Breakfasts
- * 3 Dinners
- * Visit to Flight 93 Memorial
- * Frank Lloyd Wright's "Fallingwater"
- * Duquesne Incline
- * Guided tour of Pittsburgh, including
 - University of Pittsburgh's Cathedral of Learning
 - Nationality Rooms
 - Heinz Memorial Chapel
- * Tour of Phipps Conservatory & Botanical Gardens
- * Souvenir gift
- * Luggage handling
- * Taxes and meal gratuities
- * Motorcoach transportation



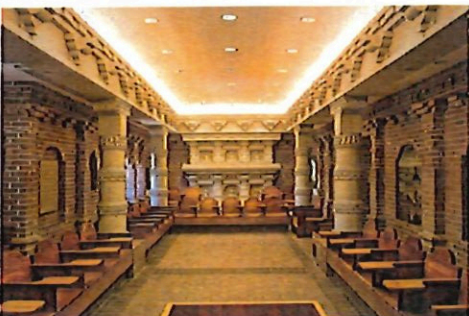
Cancellation insurance available & highly recommended; see reverse side for details.



FOR INFORMATION AND RESERVATIONS CONTACT:

LEWES SENIOR ACTIVITY CENTER

Kate O'Rourke
 32083 Janice Rd.
 Lewes, DE 19958
 (302) 645-9293



WHITE STAR TOURS

26 E. Lancaster Avenue, Reading PA 19607 * 610-775-5000 * 800-437-2323 * www.whitestartours.com

PITTSBURGH EXPRESS

Celebrate One Beautiful Region

4 Days - 3 Nights

The sample itinerary described below is approximately like the itinerary your group will be following during your stay with WHITE STAR TOURS. However, the exact times, days, and destinations may vary for your group.

- Day 1** Depart from your hometown and travel to Pittsburgh, PA where upon arrival you will check into your hotel. You will have time to freshen up before departing for **dinner in the restored P & LE Train Station at the Grand Concourse**, which is located along the Monongahela River.
- Day 2** After a continental breakfast at the hotel, depart for the **Duquesne Incline** for a fabulous cable car ride, giving you the best views of Pittsburgh. Afterwards, meet your guide for a **tour of Pittsburgh**, which will include stops at the **University of Pittsburgh's Cathedral of Learning** where you will tour some of the **Nationality Rooms**. These rooms transport you from 5th Century B.C. Athens through 1st Century Israel to 18th Century Africa. Stained glass, carved stone and inlaid wood reflect the cultures, which Pittsburgh immigrants brought from Europe, Asia, Africa, and the Middle East. You will also visit the **Heinz Memorial Chapel** for a tour of this historic landmark with its remarkable stained glass windows. After lunch on your own in the area, depart for a **tour of the Phipps Conservatory & Botanical Gardens**. This beautiful 13-room Victorian glasshouse and gardens features tropical plants, palms, orchids, ferns, desert plants and bonsai as well as many special exhibits. Tonight you will enjoy dinner at a fabulous area restaurant.
- Day 3** Enjoy a continental breakfast at the hotel, then depart for Shanksville, PA where you will visit the **Flight 93 Memorial**. Then, continue to **Frank Lloyd Wright's** architectural creation, **"Fallingwater"** for a visit. Enjoy lunch on your own in the area, then return to Pittsburgh for dinner at a popular restaurant.
- Day 4** Following a continental breakfast, check out and depart for home.

THANK YOU FOR ALLOWING WHITE STAR TOURS TO BE A PART OF YOUR TRAVEL PLANS!

TRIP CANCELLATION PROTECTION

Cancellation protection is encouraged for medical emergencies that may occur. The **Enhanced option must be paid within 14 days** from the day the first deposit for the trip is paid to the organization and/or group leader. There is an additional Enhanced upgrade - **Cancel for Any Reason**. Cancellation must be made no later than 48 hours prior to your scheduled departure, conditions, limitations, and exclusions do apply. These plans are only valid for trips booked through White Star Tours. To purchase the protection, please contact NTA/AON Insurance via their website at <https://nta.aontravelprotect.com> and provide the **Tour Operator Location #386097**.

NTA TRAVEL PROTECTION PLAN

AON

Help protect your trip payment with added value.

With NTA Travel Protection, you may choose between two plans to receive the following benefits. To obtain your state-specific plan details containing the terms, conditions and exclusions, visit <https://affinitytravelcert.com/docs/NTA>

Tour Operator Location #

386097

	Basic Plan	Enhanced Plan
Travel Insurance Benefits <i>Underwritten by United States Fire Insurance Company</i>	Maximum Benefit Amount/ Principal Sum Per Person	Maximum Benefit Amount/Principal Sum Per Person
Cancel For Any Reason (Optional)	Not Available	75% of Total Trip Cost***
Trip Cancellation	Total Trip Cost (Up to \$20,000)	Total Trip Cost (Up to \$20,000)
Trip Interruption	Total Trip Cost (Up to \$20,000)	150% of Total Trip Cost (Up to \$20,000)
Trip Delay	\$500	\$1,000
Emergency Medical Evacuation and Repatriation of Remains	\$50,000	\$100,000
Accident Medical Expense	\$10,000	\$20,000
Sickness Medical Expense	\$10,000	\$20,000
Baggage and Personal Effects	\$1,500	\$1,500
Baggage Delay	\$500	\$500
Air Flight Only Accidental Death & Dismemberment (Optional)	\$300,000 Principal Sum	\$300,000 Principal Sum
Emergency Assistance <i>Non-insurance services provided by CareFree Travel Assistance™</i>		
Travel assistance, medical assistance and emergency services	24/7	24/7

Why should I buy?

- May reimburse non-refundable cancellation penalties if you have to cancel or interrupt your trip for a wide range of covered reasons
- May cover expenses due to travel delays; baggage loss, damage or delay; and medical services as well as coordinate and pay for emergency medical evacuations
- Non-insurance emergency assistance services provided by CareFree Travel Assistance™

HOW TO ENROLL

<https://nta.aontravelprotect.com>

(also, to view plan details and specific state plan documents)

The Enhanced Plan includes a waiver of the Pre-Existing Condition exclusion if you purchase your plan within 14 days of the date your initial trip deposit is received and you are not disabled from travel when your plan cost is paid. Additional terms apply.

***Optional Cancel for Any Reason upgrade is available on the Enhanced Plan within 14 days of the date your initial trip deposit is received. Cancellation must be made no later than 48 hours prior to your scheduled departure. Conditions, limitations, and exclusions do apply. This Optional Cancel for Any Reason Benefit does not cover failure of the Retail Travel Supplier to provide the bargained-for Travel Arrangements due to cessation of operations for any reason.

Questions? Please call Aon Affinity at 1-800-388-1470.

Rates are subject to change. This plan is only available for purchase by US residents who have booked a trip with a US NTA Member Tour Operator. The plan cost is refundable within 10 days of purchase provided you have not already left on your trip or filed a claim.

Aon Affinity is the brand name for the brokerage and program administration operations of Affinity Insurance Services, Inc. (TX 13695); (AR 100106022); in CA & MN, AIS Affinity Insurance Agency, Inc. (CA 0795465); in OK, AIS Affinity Insurance Services, Inc.; in CA, Aon Affinity Insurance Services, Inc. (CA 0694493), Aon Direct Insurance Administrators and Berkely Insurance Agency and in NY, AIS Affinity Insurance Agency, Aon Affinity | 900 Stewart Avenue, Garden City, NY 11530 - 1.800.388.1470 | travelprotect@aon.com

NTA 2/22
AH-4043

NTA TRAVEL PROTECTION PLANS

Plan cost consists of insurance benefits and non-insurance assistance services.

Plan Cost	Basic Plan	Enhanced Plan*	Enhanced Plan with Cancel For Any Reason
Trip Cost per person	Plan Cost per person	Plan Cost per person	Plan Cost per person
\$0-\$250	\$32	\$42	\$64
\$251-\$500	\$38	\$51	\$78
\$501-\$750	\$59	\$79	\$121
\$751-\$1,000	\$71	\$92	\$140
\$1,001-\$1,250	\$90	\$119	\$181
\$1,251-\$1,500	\$110	\$145	\$221
\$1,501-\$1,750	\$130	\$171	\$260
\$1,751-\$2,000	\$150	\$199	\$303
\$2,001-\$2,500	\$196	\$259	\$394
\$2,501-\$3,000	\$245	\$318	\$484
\$3,001-\$3,500	\$290	\$380	\$578
\$3,501-\$4,000	\$335	\$438	\$666
\$4,001-\$4,500	\$379	\$499	\$759
\$4,501-\$5,000	\$429	\$559	\$850
\$5,001-\$10,000	9% of trip cost	11.75% of trip cost	17.85% of trip cost
Optional Air Flight Only Accidental Death and Dismemberment (AD&D) Benefit - \$300,000 Must be purchased with the Basic or Enhanced Plan	\$12	\$12	

*Includes a Waiver of the Exclusion for Pre-Existing Conditions if the following conditions are met:

- Plan must be purchased within 14 days of the date your initial trip deposit is received
- You are not disabled from travel when your plan cost is paid
- Additional terms apply

The process can be completed in 3 easy steps:

1. Provide trip information

- Tour operator location number
- Travel dates
- Product code (pre-populated)
- Citizenship
- Resident state
- Number of travelers

2. Calculate trip cost & billing information

- Names of travelers
- Trip cost
- Select plan
- Add or decline Air Flight Only AD&D option option
- Complete mailing, billing and email
- Enter credit card information

3. Review and confirm order




- Reference number will appear
- Confirmation will be emailed within minutes

Lewes Senior Activity Center
32083 Janice Road
Lewes, DE 19958

Trip Application

Pittsburgh Express
White Star Tours
(Monday, June 8th – Thursday, June 11th, 2026)

Trip Application Date: _____

Level 3:    Expect to walk between 12,000 and 15,000 steps per day. This trip requires moderate physical activity. Itinerary blends some longer days with shorter days and more leisure time. Walking tours, as well as walking slightly longer distances, up stairs or on uneven walking surfaces should be expected. Tour would include guided tours with walking distances up to a mile or up to an hour at a time.

Last Name _____ First Name _____ Middle Name _____
(IMPORTANT: As it appears on your passport/driver's license)

Address 1: _____ Address 2: _____

City: _____ State _____ Zip code _____

Cell phone: _____ Email _____

Emergency Contact while on trip:

Name: _____ Phone: _____

Relationship to Traveler:

Cost of Trip: Double Occupancy: **\$791/pp**; Single Occupancy: **\$1,090/pp**; Triple Occupancy: **\$761pp**
All non-members will incur an additional \$50.00 fee.

Deposit due with Trip Application: **\$150/pp**. **Final Payment Due April 1, 2026.** (Cash, Credit, Debit, Check - made out to Lewes Senior Activity Center)

Insurance protection is encouraged for medical emergencies that may occur. Insurance payments must be made within **14 days from the day the first deposit for the trip is paid to the LSAC.** Insurance may be purchased through NTA/AON insurance via their website at <https://nta.aontravelprotect.com> and provide the Tour Operator Location #386097.

Rooming with: _____

Telephone # _____

OVER

Pittsburgh Express, White Star Tours Application (continued)

Do you need a handicap room requested? Yes _____ No _____

(Please note: This room cannot be guaranteed, only requested.) If not available, are you still able to travel without a handicapped room? Yes _____ No _____

The undersigned travels with the Lewes Senior Activity Center (LSAC) at their own risk and agrees to hold harmless and indemnify LSAC, as permitted by law, any claims, liabilities, damages, costs, personal injury, or contraction of disease or virus, which may result relating to this travel arrangement.

The undersigned also agrees to adhere to all group guidelines and bus safety rules outlined at the pre-trip meeting and understands and adheres to the trip level as stated above.

The undersigned agrees that they are an independent traveler who can participate fully in the events and activities listed in the brochure. If they are not, there will be a companion travelling with them and responsible for assisting them (e.g., pushing wheelchair, helping them up and down stairs, getting in and out of the bus, etc.).

The undersigned agrees during this time of Covid restrictions, the CDC Vaccination cards should be carried, and mask requirements should be adhered to during this trip to ensure access to all tours and travel modes.

Signature:

_____ Date _____

Cc: LSAC, Traveler

For office use only:

Credit Card Type: _____
(Last four digits) _____

Check # _____

Cash: _____ Staff initials _____