YOUR ALASKA CRUISE INCLUDES

- Roundtrip deluxe motorcoach transportation between Danville, PA and your departure airport (including driver gratuities)
- Seven (7) Nights’ accommodations on board the NORWEGIAN BLISS (including cruise taxes, government fees & port expenses – subject to change at the discretion of the cruise line)
- All included meals and entertainment while on board the NORWEGIAN BLISS
- UNLIMITED OPEN BAR PACKAGE (*Valued at over $800 per person) (*Applies only to the 1st & 2nd Guest sharing the same cabin and includes service charges – additional guests do not qualify. Terms & Conditions apply as per Norwegian Cruise Line.)
- THREE (3) MEAL SPECIALTY DINING PACKAGE (Applies only to the 1st & 2nd Guest sharing the same cabin and includes service charges – additional guests in the cabin do not qualify. Terms & Conditions apply as per Norwegian Cruise Line)
- Prepaid Shipboard Gratuities (For restaurant and stateroom services)
- On Board Credit of $100 per Stateroom

***BOOK AN OCEANVIEW, BALCONY OR MINI-SUITE CABIN AND RECEIVE:
250 MINUTES OF WI-FI ($130 VALUE) $50 SHORE EXCURSION CREDIT PER PORT
These Additional Amenities are PER CABIN and Restrictions Apply per Norwegian Cruise Line.

YOUR ALASKA CRUISE ITINERARY

<table>
<thead>
<tr>
<th>Day</th>
<th>Port of Call</th>
<th>Arrive</th>
<th>Depart</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 16</td>
<td>Seattle, Washington</td>
<td>5:00 PM</td>
<td></td>
</tr>
<tr>
<td>August 17</td>
<td>Day at Sea</td>
<td></td>
<td></td>
</tr>
<tr>
<td>August 18</td>
<td>Juneau, Alaska</td>
<td>2:30 PM</td>
<td>11:00 PM</td>
</tr>
<tr>
<td>August 19</td>
<td>Skagway, Alaska</td>
<td>7:00 AM</td>
<td>8:15 PM</td>
</tr>
<tr>
<td>August 20</td>
<td>Cruise Glacier Bay</td>
<td></td>
<td></td>
</tr>
<tr>
<td>August 21</td>
<td>Ketchikan, Alaska</td>
<td>7:00 AM</td>
<td>1:15 PM</td>
</tr>
<tr>
<td>August 22</td>
<td>Victoria, British Columbia</td>
<td>7:00 PM</td>
<td>11:59 PM</td>
</tr>
<tr>
<td>August 23</td>
<td>Seattle, Washington</td>
<td>6:00 AM</td>
<td></td>
</tr>
</tbody>
</table>

***All itineraries are subject to change without notice.***

***PLEASE NOTE: Rates are CRUISE ONLY and do NOT include roundtrip air transportation and roundtrip airport to pier transfers in Seattle. These will be added at a later date once August 2020 air is confirmed.***

JOIN THE MEADOWS GROUP AS THEY CRUISE TO ALASKA 
ON BOARD THE NORWEGIAN BLISS
Sunday, August 16 – Sunday, August 23, 2020

CRUISE ONLY
RATE PER PERSON*

Category IA ~ Inside $1,973
Category BA ~ Balcony $2,750

**Please see your Boscov’s Travel Specialist for additional cabin categories that may be available.

*Rates based on double occupancy. All categories are subject to availability at time of booking.

SPECIAL FINANCING AVAILABLE with your Boscov’s Credit Card.
See your Boscov’s Travel Specialist for details.

SPECIAL FINANCING AVAILABLE

OPTIONAL: GROUP DELUXE TRAVEL PROTECTION PLAN
Extensive plans to help protect your trip. We encourage all travelers to purchase a plan at the time of initial trip deposit.

$138 per person, Category IA
$206 per person, Category BA

Should anything additional be added to this trip, your travel protection plan rates may increase. Travel Protection Plan becomes NON-REFUNDABLE 14 days from date of purchase. Once air is confirmed, travel protection will be adjusted accordingly in order to provide complete coverage.

***PLEASE NOTE: Rates are CRUISE ONLY and do NOT include roundtrip air transportation and roundtrip airport to pier transfers in Seattle. These will be added at a later date once August 2020 air is confirmed.***
General Terms and Conditions

RESERVATIONS: A deposit of $250 per person will be necessary in order to secure your cabin ($500 per person will be required for SINGLE OCCUPANCY accommodations), along with FULL LEGAL NAMES & DATES OF BIRTH. Triple and Quad occupancy cabins are based on availability at time of booking as these cabins are very limited in number. The balance will be due to us by FRIDAY, APRIL 3, 2020.

PAYMENTS: You may charge any portion or the entire amount to your Boscov's Charge, MasterCard or Visa. If paying by check, make it payable to Boscov's Travel.

GUARANTEE OF RATES: All categories are subject to availability at time of booking. Cruise taxes, port expenses and government fees are subject to change at any time without notice at the discretion of the cruise line. All increases would be the responsibility of the cruise participant and must be paid in full prior to departure. Reservations paid in full at time of increase/change would not be exempt. Failure to pay these charges would result in denied boarding/travel.

ROUNDTrip TRANSFERS: Roundtrip motorcoach transfers to your departure airport are INCLUDED in the rates as listed on this flyer and include driver gratuities. Transfers are based on a MINIMUM of 30 full paying passengers. Should the numbers be less, the cost is subject to increase.

ROUNDTrip AIR TRANSPORTATION & ROUNDTrip TRANSFERS IN SEATTLE: Roundtrip air transportation to Seattle, Washington and roundtrip transfers in Seattle, Washington is NOT included in the rates as listed on this flyer and will be added at a later date once August 2020 air has been confirmed.

PREPAID SHIPBOARD GRATUITIES: Shipboard gratuities are included in the rates as listed on this flyer.

UNLIMITED OPEN BAR PACKAGE/THREE (3) MEAL SPECIALTY DINING PACKAGE: The Unlimited Open Bar Package & Three (3) Meal Specialty Dining Package is inclusive of service charges and is only available to the 1st & 2nd guest sharing the same cabin. Additional guests in the same cabin do NOT qualify.

Terms & Conditions apply per Norwegian Cruise Line and these packages can be removed or withdrawn at any time at the cruise line's discretion.

CANCELLATION: Cancellations result in a costly process involving telephone calls, correspondence, record adjustments, refund checks, etc.; therefore, an administrative fee of $25.00 per person will be assessed, in additional to any non-refundable costs. IN ADDITION, for cancellations made between 119 days and 91 days prior to sailing, 25% of the cruise package cost will be assessed, in addition to any non-recoverable costs, including air. For cancellations made between 90 days and 61 days prior to sailing, 50% of the cruise package cost will be assessed, in addition to any non-recoverable costs, including air. For cancellations made between 60 days and 31 days prior to sailing, 75% of the cruise package cost will be assessed, in addition to any non-recoverable costs, including air. Cancellations made 30 days or less prior to sailing will receive NO REFUND.

OPTIONAL TRAVEL PROTECTION PLAN: Group Deluxe Travel Protection is OPTIONAL and NOT included in the price quoted. If you decide to purchase a Travel Protection Plan, it is encouraged at the time of initial trip deposit. Plans help provide coverage for Trip Cancellation/Interruption, Baggage Delay/Loss, Missed Connection, Emergency Accident and Sickness Medical Expense, Emergency Evacuation/Reparation of Remains, and more! These are only the highlights of the plan so please refer to your Plan Document for benefit limits and specifications. Travel Protection Plan becomes NON-REFUNDABLE 14 days from date of purchase.

VERY IMPORTANT: Optional Travel Protection Plan rates are based on double occupancy and on the rates as listed on this flyer. Should anything additional be added to your booking to increase your per person cost, your travel protection plan rates may increase in order to provide complete coverage of your package.

TRAVEL DOCUMENTS: All United States citizens must carry a VALID U.S. PASSPORT with expiration date AT LEAST SIX (6) MONTHS beyond the last day of travel. If you don’t have a passport, contact Heather Yacko at 570.374.0121 for information on how to apply for one. NOTE: Due to cruise line and airline security measures, your passport name MUST match your cruise line and airline ticket name or you may be denied boarding. IMPORTANT: We recommend that our clients traveling abroad take a photocopy of their passport (packed separately from your actual passport) and/or photocopy with your cell phone. We also recommend leaving a copy at home with your emergency contact.

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Insurance benefits are not payable for any loss 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 to travel with You, while sane or insane; 2. an act of declared or undeclared war; 3. participating in maneuvers or training exercises of an armed service, except while participating in weekend or summer training for the reserve forces of the United States, including the National Guard; 4. riding or driving in races, or speed or endurance competitions or events; 5. mountaineering (engaging in the sport of scaling mountains generally requiring the use of picks, ropes, or other special equipment); 6. participating as a member of a team or club in any sport or competition participated in weekend or summer training for the reserve forces of the United States, including the National Guard; 7. participating in bodily contact sports, skydiving or parachuting, hang gliding or bungee cord jumping; 8. piloting or learning to pilot or acting as a member of the crew of any aircraft; 9. being intoxicated, or under the influence of any controlled substance unless as administered or prescribed by a Legally Qualified Physician; 10. the commission of or attempt to commit a felony or being engaged in an illegal occupation; 11. normal childbirth or pregnancy (except Complications of Pregnancy) or voluntarily induced abortion; 12. dental treatment (except as coverage is otherwise specifically provided); 13. amounts which exceed the Maximum Benefit Amount for each coverage as shown in the Schedule of Benefits; 14. due to a Pre-Existing Condition, as defined in the Policy. The Pre-Existing Condition Limitation does not apply to the Emergency Medical Evacuation or return of remains coverage; 15. medical treatment during or arising from a Trip undertaken for the purpose or in intent of securing medical treatment; 16. a mental or nervous condition, unless hospitalized for that condition while the Policy is in effect for You; 17. due to loss or damage (including death or injury) and any associated cost or expense resulting directly from the discharge, explosion or use of any device, weapon or material employing or involving chemical, biological, radiological or similar agents, whether in time of peace or war, and regardless of who commits the act and regardless of any other sequence thereto.

The following limitation applies to Trip Cancellation: All cancellations must be reported to the Travel Supplier within 72 hours of the event causing the need to cancel. If the event delays the reporting of the cancellation beyond the 72 hours, the event should be reported as soon as possible. All other delays of reporting beyond 72 hours will result in reduced benefit payments.

Additional Limitations and Exclusions Specific to Baggage and Personal Effects: Benefits are not payable for any loss caused by or resulting from: breakage of brittle or fragile equipment; wear and tear or gradual deterioration; confiscation or appropriation by order of any government or custom’s rule; theft or pillage while left in any unlocked or unattended vehicle; property illegally acquired, kept, stored or transported; Your negligent acts or omissions; or property shipped as freight or shipped prior to the Scheduled Departure Date; or electrical current, including electric arcing that damages or destroys electrical devices or appliances.

Pre-Existing Conditions Exclusion
Your plan contains a Pre-Existing Condition provision which may have an impact on your insurance coverage. Pre-existing Condition means an injury, sickness or condition of you or your traveling companion, family member or your business partner scheduled or booked to travel with you within the 180 day period prior to the Effective Date of Your Trip Cancellation coverage under the plan. Please refer to the Plan Document for the complete definition of a pre-existing condition.

Purchase Up to Final Trip Payment for Pre-Existing Condition Waiver!
The Pre-Existing Condition Exclusion will be waived if the pre-existing condition plan is purchased at or before final trip payment for the trip, for the full non-refundable cost of the trip and you are not disabled from travel at the time you pay the premium.

PLEASE REFER TO THE PLAN DOCUMENTS FOR A COMPLETE DESCRIPTION OF COVERAGE.

This document contains highlights of the plan. The plan contains insurance benefits underwritten by the United States Fire Insurance Company under form series T210. C&F and Crum & Forster are registered trademarks of United States Fire Insurance Company. The Crum & Forster group of companies is rated A (Excellent) by AM Best Company 2018. The plan also contains non-insurance Travel Assistance Services that are provided by On Call International, and not by United States Fire Insurance Company or Travel Insured International. Coverages may vary and not all coverage is available in all jurisdictions. Individuals looking to obtain additional information regarding the features and pricing of each travel plan component, please contact Travel Insured.
Reservation Coupon

Send to: Attn: Heather Yacko, Boscov’s Travel Selinsgrove, 1 Susquehanna Valley Mall, Suite 2, Selinsgrove, PA 17870. For more information, please contact Heather at 570.374.0121 for further information or email hyacko@boscovs.com.

I would like to join THE MEADOWS GROUP on board Norwegian Cruise Line’s NORWEGIAN BLISS sailing to ALASKA, AUGUST 16 – 23, 2020.

My FULL deposit of $250 per person is enclosed for _____# of person(s); [500 per person will be required for Single Occupancy] – deposit will confirm cabin.

I wish to add OPTIONAL TRAVEL PROTECTION PLAN** (Based on Double Occupancy)

___$138 per person – Category IA

___$206 per person – Category BA

**Should anything additional be added to your booking to increase your per person cost (such as air & transfers in Seattle), your travel protection plan rates may increase in order to provide complete coverage of your package. Travel Protection Plan becomes non-refundable 14 days after purchase.

I DECLINE Travel Protection Plan _____________ Initials _____________ Date

Due to security requirements any name changes after documents are issued will incur a change fee.

FULL LEGAL NAME (S) MUST BE LISTED EXACTLY AS IT APPEARS ON YOUR PASSPORT INCLUDING MIDDLE NAMES AND/OR INITIALS.

#1 First Name ___________________________ Middle Name ___________________________ Last Name ___________________________

Gender: __Male __Female Date of Birth ___________________________ Passport Number ___________________________ Date of Expiration ___________________________

Airline Name & Frequent Flyer #: ___________________________  Airline Name & Frequent Flyer #: ___________________________

TSA/Known Traveler Number: ___________________________  Global Entry Number: ___________________________  Seat Preference (Not Guaranteed): ___________________________

#2 First Name ___________________________ Middle Name ___________________________ Last Name ___________________________

Gender: __Male __Female Date of Birth ___________________________ Passport Number ___________________________ Date of Expiration ___________________________

Airline Name & Frequent Flyer #: ___________________________  Airline Name & Frequent Flyer #: ___________________________

TSA/Known Traveler Number: ___________________________  Global Entry Number: ___________________________  Seat Preference (Not Guaranteed): ___________________________

Street Address ___________________________ City ___________________________ State Zip ___________________________

Daytime phone (          ) ___________________________ Cell phone (          ) ___________________________ Email Address ___________________________

Category Selected ______ Rate per Person ______ Latitudes Number(s) / ______

Cruise Dining: DINING IS FREESTYLE ON BOARD NORWEGIAN CRUISE LINES – DINING ROOM IS NON-SMOKING

SPECIAL REQUESTS (Including but not limited to a CPAP machine, refrigerated medication, epi pen, mobility assistance devices, oxygen, dietary restrictions, special services, etc.): ______________________________________________________________

We would like to travel with the following people: ______________________________________________________________

We are celebrating a SPECIAL OCCASION (Birthday, Anniversary, etc.): ______________________________________________________________

Emergency Contact Name: ___________________________ Phone (          ) ___________________________ Relationship ___________________________

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 CHARGE** # ___________________________

**Please see your Boscov’s Travel Specialist for details.

I wish to use my MASTERCARD/VISA # ___________________________

EXP: ___________________________ Security Code: ___________________________

I wish to pay by CHECK – please make check payable to BOSCOV’S TRAVEL

CHECK # ___________________________