

NIAGARA FALLS & FINGER LAKES



American Bank &
American State Bank
Member FDIC



August 10-17, 2025

PASSENGER INFORMATION (1st Traveler)

Full name must be exactly as it appears on your passport, passport card, or passport application. Passport information may be sent later if you have yet to apply.

First Name: _____

Middle Name(s): _____

Last Name(s): _____

Preferred Name: _____ Gender (circle one): M F

Address: _____

City: _____ State: _____ Zip: _____

Preferred Phone: _____

Email: _____

Passport #: _____

Passport Expiration Date: ____/____/____
month / day / year

Date of Birth: ____/____/____
month / day / year

Dietary Needs: _____

Additional Special Requests/Needs: _____

Emergency Contact: _____

Relationship: _____

Emergency Contact's Phone: _____

PASSENGER INFORMATION (2nd Traveler)

Full name must be exactly as it appears on your passport, passport card, or passport application. Passport information may be sent later if you have yet to apply.

First Name: _____

Middle Name(s): _____

Last Name(s): _____

Preferred Name: _____ Gender (circle one): M F

Address: _____

City: _____ State: _____ Zip: _____

Preferred Phone: _____

Email: _____

Passport #: _____

Passport Expiration Date: ____/____/____
month / day / year

Date of Birth: ____/____/____
month / day / year

Dietary Needs: _____

Additional Special Requests/Needs: _____

Emergency Contact: _____

Relationship: _____

Emergency Contact's Phone: _____

American Bank and American State Bank RECOMMEND all travelers purchase a Travel Protection Plan. For your convenience, we offer a Travel Protection Plan provided by Traveler Insurance Services.

Yes, I would like to purchase the offered plan.
See the included Traveler Insurance Services flyer for pricing.
(Payment may be sent with your deposit or with final payment to American State Bank)

No, I decline the offered plan.

Tour Cost: per person, Double: \$3,995 Single: \$4,795

Travel Insurance is underwritten by Zurich American Insurance Company, (NAIC #16535). Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. To view state specific fraud warnings, visit: <https://www.travelersinsurance.com/company/fraud-warning>. Traveler Insurance Services Inc. ("Traveler Insurance") maintains an updated list of alerts and financial defaults on its website available at <https://www.travelersinsurance.com/customer-service/travel-alerts/travel-supplier>.

Traveler Insurance Services, Inc. CA Agency License #0D10209. Insurance coverages underwritten by individual member companies of Zurich in North America, including Zurich American Insurance Company (NAIC # 16535).

Sleeping Preference (circle one): Two Beds One Bed

Roommate (name): _____

For further information or questions, please contact:

Loreen Marra
American Spirit Club Coordinator
American State Bank
525 N Main Ave, Sioux Center, IA 51250
(712) 722-4846 or (866) 938-4846

A Travel Protection Plan may be purchased any time before or with final payment to American State Bank

PLEASE TURN OVER FOR SIGNATURE

NIAGARA FALLS & FINGER LAKES

DOCUMENTATION: Each U.S. citizen must have a valid passport through November 17, 2025, to participate. If you don't have a passport, call our office and we'll tell you how to apply for one. Holders of non-U.S. passports have different entry requirements.

OPTIONAL TRAVEL PROTECTION PLAN: American Bank and American State Bank recommend that you purchase a Travel Protection Plan to help protect you and your travel investment against the unexpected so you can relax and enjoy your trip. Participants may purchase this coverage from the provider of your choice. For your convenience, we offer a Travel Protection Plan, 360° Group Premier provided by Travelers Insurance Services, that helps provide coverage for trip cancellation/interruption, trip delay, baggage loss, theft or damage, medical expense and emergency evacuation coverage, and more. For more information, please see the product flyer included with this brochure. If you would like to purchase the offered plan, please check the applicable box on the registration form. Please Note: The plan cannot be purchased after final payment. To view/download the Policy, which provides the full coverage terms and details, including limitations and exclusions, go to: <https://policy.travelersinsurance.com/GPZ-1023>. To view state specific fraud warnings, visit: <https://www.travelersinsurance.com/company/fraud-warning>. The purchase of this product is not required in order to purchase any other travel product or service. Your travel retailer might not be licensed to sell travel insurance and will only be able to provide general information about the product. An unlicensed travel retailer may not answer questions about the terms and conditions of the insurance offered and may not evaluate the adequacy of your existing insurance coverage. The products being offered provide insurance coverage that only applies during your covered trip. You may have insurance coverage from other sources that provide similar benefits but may be subject to different restrictions depending upon the coverage. You may wish to compare the terms of the travel policy offered through Travelers with any existing life, health, home, and automobile insurance policies you may have. If you have questions about your coverage under your existing insurance policies, contact your insurer or insurance agent or broker. Travelers Insurance Services, Inc. CA Agency License #0D10209. Travel Insurance is offered on behalf of and under the direction of Travelers Insurance Services. Insurance coverages underwritten by individual member companies of Zurich in North America, including Zurich American Insurance Company (NAIC # 16535).

CANCELLATION: Full refund of all monies is made if cancellation is received in writing to American Bank and American State Bank prior to final payment. A 100% fee is charged if the cancellation occurs between final payment and departure. If the reason for cancellation is due to a medical or other reason that is covered by Travel Protection, you may be eligible for reimbursement for such fees from your Travel Protection Plan provider.

TRAVELERS WITH SPECIAL NEEDS: You must advise Star Destinations, Inc. (SDI) at the time of registration of any disability requiring special attention. SDI will make reasonable efforts to accommodate the special needs of travelers. The Americans with Disabilities Act is applicable only in the U.S., and accommodations outside the U.S. may be more limited. Travelers requiring assistance are required to be accompanied by a companion who is capable of, and totally responsible for, providing the assistance. Neither SDI personnel nor its suppliers may lift or physically assist with travelers' special needs including, but not limited to, walking, dining, or other routine activities. Travelers thinking they may need assistance should call SDI to determine what accommodations may reasonably be provided. Arrangements at an additional cost are the financial responsibility of the traveler.

TERMS & CONDITIONS: Star Destinations, Inc. (SDI) acts as an agent for suppliers such as airlines, hotels, or activities to provide you with the travel services and accommodations. Although great care is taken in choosing suppliers, we are unable to control them and, therefore, cannot be held responsible or liable for their acts or omissions. Should a contracted supplier be unable to perform the required services, SDI reserves the right to substitute advertised services with similar services. SDI is not responsible for any claims, losses, damages, costs, or expenses arising out of injury, accident or death, damage, loss, trip delay, delay of baggage, cancellation, or other inconvenience resulting from mechanical breakdowns, fire, theft, civil disturbances, government actions, weather, and other factors beyond our control. In the case of a pandemic or worldwide or localized disturbance that interrupts or cancels your planned tour, SDI will do everything possible to retrieve any refundable components of your tour but cannot be held responsible for any non-refundable portions of the tour. In addition, SDI reserves the right to vary the tour price advertised or printed to cover any increase in airfare, volatile fuel prices, government taxes and charges, exchange rate fluctuations, or other tour-related tariffs or newly announced travel costs. Pricing and restrictions may be increased due to unexpected requirements for health, safety, or economic welfare of tour members. Be aware that any public interaction carries an inherent risk of exposure to infectious disease or illness and travelers assume personal risk upon tour registration. If you request a variation or change to your booking, SDI may choose to accept or reject that request. If accepted, you are responsible for any fees associated with it. If the minimum number of passengers required to operate the tour is not met, SDI reserves the right to cancel the tour.

It is the sole discretion of SDI to refuse transport to any passenger, or require any passenger to leave the tour, if it is reasonably believed that the passenger (1) is dangerous to others or himself or herself; (2) is engaged in, or is threatening to engage in behavior that may adversely affect the safety, security, enjoyment, or well-being of other passengers, including behavior that is disruptive, verbally or physically abusive, obnoxious, harassing, or obscene; or (3) has failed or refused to follow SDI's rules and procedures or the instructions of its representatives. In the event a passenger is removed, such passenger may be left at any location without any liability to SDI or its representatives. SDI shall not be required to refund any portion of the price paid by any passenger who is removed, nor shall SDI be responsible for any further expenses incurred by the passenger. SDI shall be entitled to recover from the passenger any costs or expenses incurred by SDI or its representatives in the removal of the passenger or the exercise or enforcement of this clause.

A \$500 deposit per person is required with your registration form in order to reserve your spot.

FINAL PAYMENT IS DUE: APRIL 10, 2025

DEPOSIT PAYMENT INFORMATION:

Enclosed is my check, made payable to American State Bank

In the amount of: _____

Mail Check to: American State Bank
525 N Main Ave, Sioux Center, IA 51250

By registering for this tour and signing below, **you acknowledge that American Bank and American State Bank reserve the right to refuse transport at any time to any passenger who does not meet the activity level requirements below.** Neither American Bank, American State Bank, nor Star Destinations will be required to refund any portion of the price paid by any passenger who is removed in enforcement of this clause.

Activity Level: Minimal to Moderate

In order to participate in this tour, you must:

- Be able to walk/stand 2-3 hours at a time at an easy pace in all weather conditions
- Be able to maneuver some stairs, inclines, and uneven surfaces without assistance

Signature (1st Traveler): _____

Date: _____

Please initial to indicate you have read/agree to the terms and conditions: _____

Signature (2nd Traveler): _____

Date: _____

Please initial to indicate you have read/agree to the terms and conditions: _____

By registering for this trip, I agree to grant to Star Destinations and its authorized representatives permission to record on photography film and/or video, pictures of my participation. I further agree that any or all of the material photographed may be used, in any form, as part of any future publications, brochure, or other printed or digital materials used to promote Star Destinations, and further that such use shall be without payment of fees, royalties, special credit or other compensation.