

OCEAN CITY **AARP** CHAPTER 1917
Presents

MOMUMENTS, MUSIC & MEMORIALS

**FLIGHT 93 MEMORIAL, PA – ROCK & ROLL HALLOF FAME, OH
ILLUMINATION TOUR OF DC MONUMENTS & ARLINGTON CEMETARY**

May 14 - 17, 2019

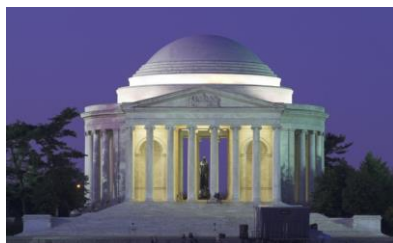
Day 1: Flight 93 Memorial & Duquesne Incline. Arrive in Shanksville, PA where you'll visit the Flight 93 Memorial. Walk along the crash site and field of honor. See the 93 Foot Tower of Voices that holds 40 wind chimes honoring each of the 40 heroes who took the plane back. You'll then travel on to the Duquesne Incline where you will enjoy one of the 10 best cityscape views in the world from atop Mt. Washington in Pittsburg. (Dinner Included.)



Day 2: Rock & Roll Hall of Fame. Following Breakfast (included), we'll depart for Cleveland, OH to the famed Rock & Roll Hall of Fame. Spend the day tracing the history of Rock & Roll, seeking out the collections of the musical icons we grew up with. You may also want to enjoy the Cleveland Waterfront or the Natural History Museum next door. (Dinner Included)



Day 3: Illumination Tour, Washington DC: Following breakfast, we'll depart for Washington DC. This evening, we'll embark on a guided Illumination Tour of the beautiful lighted monuments and buildings under the night time sky. (Dinner Incl.)



Day 4: Arlington National Cemetery: Following breakfast, we'll depart for the "Tourmobile" that will take us on a guided tour of Arlington National Cemetery. Then it's time to say adieu and head home.

COST: \$499pp (Dbl); \$671 (Sngl)

\$100.00 Deposit Due By March 14th - Balance Due April 11th

(Includes: Gratuities & Driver Tip) Cancellation by Replacement Only or with Trip Assurance available - \$45.00/pp

For RESERVATIONS and additional information, please contact:

Fran Smith 410-726-6166 Or E-mail: aarp1917travel@yahoo.com or Frans524@yahoo.com

----- Registration Form - Cut Here -----

NAME: _____ STREET: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL: _____ E-MAIL _____

TRIP: **MONUMENTS, MUSIC & MEMORIALS**

People: _____ CASH: _____ CHECK#: _____ CHECK \$: _____

I ACKNOWLEDGE THAT I HAVE BEEN OFFERED TRIP INSURANCE: ACCEPT [] DECLINE []

SIGNATURE: _____ Date _____

MAKE CHECKS FOR TRIP PAYABLE TO: AARP 1917 Travel

MAIL TO: PO Box 4193, Ocean City, MD 21843

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