New York City Christmas & Holiday Lights Tour December 16th - 18th- 2025 Lash Services d/b/a/ Ben Lash Trips

Dear Friends,

You are invited to join us for our New York City Christmas & Holiday Lights Trip Tuesday, December 16th through Thursday, December 18th.

The flight will leave the Columbus airport early Tuesday, December 16^h & return late Thursday, December 18th to maximize your time in New York. Members of the trip are responsible for transportation to and from the Columbus John Glenn International Airport. I do not include a checked bag as part of the trip fee because many of my guests prefer only taking a carry-on bag. Rather than charge everyone the \$70.00 per bag fee my guests have the option to check a bag for the trip. The optional checked bag fee is \$70.00 round trip. Please note Ben Lash Trips reserves the right to designate to fly from either the Columbus or Cleveland airports for the trip.

Transportation to and from the airport & hotel in NY is included. The trip includes 3 days & 2 nights accommodations in the heart of Times Square at the Hotel Edison in New York City.

Your trip will include attending the world-famous Radio City Rockettes Christmas Spectacular at Radio City Music Hall.

Your trip will include a bus/walking tour of the world-famous Christmas lights of Brooklyn Dyker Heights.

Your trip will include a walking & subway professionally guided tour of the Christmas lights of Manhattan,

Red Giant Ornaments Fountain Plaza Saks 5th Avenue Light Show Winter Village at Bryant Park Grand Central Terminal Holiday Fair Hudson Yards. Lights of Dyker Heights Christmas Tree at Rockefeller Center Washington Square Park Christmas Lights Time Warner Center Christmas at Macy's Union Square Holiday Fair

PLEASE NOTE THE: Christmas & Holiday Lights Trip Will Take Place at The Same Time as My Broadway Musical Trip.

Dennis of Guide Services of New York will lead the Manhattan Lights Tour. We have worked together since 2003! Best Tour Guide in NY!

Your trip will in include breakfast Wednesday & Thursday morning. Your trip will include an unlimited MTA subway card during the trip.

Your trip will in include free time with options to explore the city, visit Times Square, and visit the 911 Memorial. Please note that a visit to New York City will include a good bit of walking and use of stairs at the subway stations.

Single Occupancy (Call)

Double Occupancy \$1,449.00

Triple Occupancy \$1,349.00

Quad Occupancy \$1,249.00

To register - \$800.00 pp deposit

\$649.00 or balance (2nd payment) is due on or before November 1, 2025

Make checks payable to:

Ben Lash Trips P.O. Box 85

New Washington, Oh 44854

Venmo @Ben-Lash-4 Credit Card Fee 3.55% For more information contact Ben Lash

blash@woh.rr.com

419-543-2221

Ben@BenLashTrips.com Page 1

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Lash Services d/b/a/ Ben Lash Trips

Name (1)		
Name (2)		Please print
Address		your name
City/St/Zip		exactly as it
Phone (1)	(2)	appears on your
Date of Birth 1	needed for airline	Photo ID
Date of Birth 2		
	if applicable for TSA Pre√	This Is Very
	if applicable for TSA Pre√	Important
	or email me at <u>blash@woh.rr</u>	com.
•	CANCELLATIONS y payment will be made if the trip takes place, and you of flue to a lack of participants a FULL & COMPLETE REFUNI	=
If "Ben Lash Trips" is forced to cancel the trip dutragedy that would severely alter or prohibit mathe cancellation. Some trip expenses may not b	ue to circumstances beyond its control such as a natural king the trip refunds shall be made in the amount that "	disaster, war, terrorist attack or other 'Ben Lash Trips" is able to recover from
·	at a website like squaremouth.com to compare policies	·
Please read carefully before signing,		
Signature (1)	Date	
Signature (2)	Date	
	To register - \$800.00 pp deposit –	mbor 1 2025

Triple Occupancy \$1,349.00

Single Occupancy (Call)

Double Occupancy \$1,449.00

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Lash Services d/b/a/ Ben Lash Trips

Upon signing this wavier form and/or participating in the activities of this trip the persons embarking on a "Ben Lash Trips" trip agree that Lash Services, LLC, d/b/a "Ben Lash Trips", its principals, employees, tour guides and/or agents, collectively referred to herein as "Ben Lash Trips," shall not be held liable for any damage, loss, expense, or claim of any nature, including but not limited to:

- Any loss or damage of property that might result from making this trip.
- Any sickness, illness, accident, medical expense including Covid19 or any infectious disease that might result from making this trip.
- Any expense or loss that might result from circumstances beyond the control of "Ben Lash Trips."
- Anything other than what "Ben Lash Trips" agrees to provide as listed on the "Ben Lash Trips" Registration Form.

I understand that "Ben Lash Trips" acts only as an agent for passengers in all matters connected with the trip including but not limited to hotel services, sightseeing tours, other suppliers or services, and transportation by any and all means. As agent "Ben Lash Trips" is not responsible for any damage, expense or inconvenience caused by delayed or canceled transport services, changes of schedule, strikes, weather, or other conditions beyond its control. All such losses or expenses will be borne by the passenger. All suppliers or services are independent of and are not owned or operated by "Ben Lash Trips".

I agree to provide the hotel with a credit card to cover any expenses at the hotel that exceed the basic overnight accommodations that are included as part of the trip. I understand and agree that I am responsible for any and all hotel expenses for my room other than the basic overnight accommodations that are included as part of the trip. I understand and agree that my responsibility includes any damage and that might occur in the room. I understand and agree that my responsibility includes any and all damage or expense I might cause on the trip.

As a participant on the tour, I accept full responsibility for my behavior, well-being, and health throughout the tour, which may involve a variety of activities, unfamiliar locations, and modes of travel, including but not limited to walking, climbing stairs and physical activity as part of the normal itinerary. I understand that I am responsible to follow the time schedule of the trip itinerary. No carrier shall have, or incur, any responsibility or liability to any person taking the tour except its liability as a common carrier.

The aforesaid "Ben Lash Trips" accepts no responsibility for losses or additional expenses due to delay or changes of schedules, weather, strikes, war, quarantine, or other causes. All such losses or expenses will have to be borne by the passenger. The right is reserved to accept, to decline or to retain any person as a member of the tour, or to cancel or to alter the tour.

I grant "Ben Lash Trips" a worldwide, royalty-free license to use my photographic, video, or digital likeness for promotional or any other purpose. My participation on a "Ben Lash Trips" trip acknowledges I have read, agree to, and understand all of the terms of this waiver form.

Passenger One

I authorize the staff of "Ben Lash Trips" to act according to their best judgment in the event of an emergency that requires medical attention. I waive any claim and release Ben Lash and "Ben Lash Trips", its staff, principals, employees, tour guides and/or agents of any liability for injury or illness, which may occur while on the tour. I have no knowledge of any impairment that would limit my full participation in the tour activities. I understand that I will be responsible for any and all medical expenses that might be incurred as a result of participation in a Ben Lash Trip. I on behalf of myself, any and all minor children participating in the "Ben Lash Trips" with me, I have read, understand and agree to the terms of this waiver form.

Name (Print)	
Signature	Date
Passenger Two	Page 3
and release Ben Lash and "Ben Lash Trips", its staff, principals, employed on the tour. I have no knowledge of any impairment that would limit my	dgment in the event of an emergency that requires medical attention. I waive any cla es, tour guides and/or agents of any liability for injury or illness, which may occur why full participation in the tour activities. I understand that I will be responsible for any ion in a Ben Lash Trip. I on behalf of myself, any and all minor children participating in terms of this waiver form.
Name (Print)	
Signature	Date

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Lash Services d/b/a/ Ben Lash Trips

By signing below, I acknowledge the contagious nature of COVID-19 or any contagious disease and voluntarily assume the risk that I may be exposed to or infected by COVID-19 or any contagious disease by attending the Ben Lash Trips *The trip is limited to 10 rooms. Send your deposit with this form to complete your registration to guarantee your room on the trip. Christmas & Holiday Lights Trip - December 17th - 19th"* and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 or any contagious disease as a result of attendance or participation on the Ben Lash Trips *Christmas & Holiday Lights Trip - December 17th - 19th"* may result from the actions, omissions, or negligence of myself and others, including, but not limited to, other attendees or participants on the Ben Lash Trips *Christmas & Holiday Lights Trip - December 17th - 19th"* I voluntarily assume all of the foregoing risks and accept sole responsibility for any illness, injury (including but not limited to personal injury, disability, and death), damage or loss to myself in connection with my attendance or participation on the Ben Lash Trips "New York Broadway Musical Trip December 17th - 19th"" Without limiting the generality of the waiver, release, and indemnification described above, I hereby irrevocably release, waive, discharge, indemnify and hold harmless each of the Releases named above from any and all liability to me, my children and my next of kin, for any and all claims, demands, suits, actions, causes of action, costs, expenses, losses, awards, judgments, injuries or damages (including reasonable attorney fees and related costs incurred by any of the Releases) caused or alleged to have been caused as a result of the novel coronavirus, COVID-19 or any contagious disease or exposure thereto.

I further agree that I will comply with all applicable laws, rules, and regulations pertaining to COVID-19 (including wearing of face mask, frequent hand washing, and any other similar requirements).

I HAVE READ THE ABOVE WAIVER, RELEASE, AND INDEMNIFICATION OF LIABILITY AND I UNDERSTAND THAT I AM VOLUNTARILY GIVING UP CERTAIN RIGHTS BY SIGNING IT.

Passenger One

I authorize the staff of "Ben Lash Trips" to act according to their best judgment in the event of an emergency that requires medical attention. I waive any claim and release Ben Lash and "Ben Lash Trips", its staff, principals, employees, tour guides and/or agents of any liability for injury or illness, which may occur while on the tour. I have no knowledge of any impairment that would limit my full participation in the tour activities. I understand that I will be responsible for any and all medical expenses that might be incurred as a result of participation in a Ben Lash Trip. I on behalf of myself, any & all minor children participating in the "Ben Lash Trips" with me, I have read, understand and agree to the terms of this waiver form.

Date	Cell Phone on trip	_
Trips", its staff, principals, em no knowledge of any impairn any and all medical expenses	ployees, tour guides and/or agents of any liability for nent that would limit my full participation in the tou that might be incurred as a result of participation in	or injury ir a Ben
Date	Cell Phone on trip	_
	Date ing to their best judgment in t Trips", its staff, principals, em no knowledge of any impairm any and all medical expenses t ren participating in the "Ben L	DateCell Phone on triping to their best judgment in the event of an emergency that requires medical at Trips", its staff, principals, employees, tour guides and/or agents of any liability for no knowledge of any impairment that would limit my full participation in the tou any and all medical expenses that might be incurred as a result of participation in ren participating in the "Ben Lash Trips" with me, I have read, understand and ag

My participation on a

"Ben Lash Trips" trip acknowledges I have read, agree to, and understand all the terms of this waiver form. (4)