ZACHARY TRAVEL
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Zachary, LA 70791
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Boston Pops

July 3-8, 2026

6 Days, 5 Nights

Celebrate Independence Day where it all began with this 6-day Boston tour! From Harborfest and fireworks with the Boston Pops to the Freedom Trail, whale watching, and a visit to Plimoth Patuxet, this patriotic journey blends American history, coastal charm, and unforgettable New England experiences.

$3,899
per person*

*price based on double occupancy.
Single supplement: $700

PICKUP LOCATIONS
Baton Rouge

TOUR INCLUDES

- ✓ Airfare from Baton Rouge
- ✓ Tour Guide
- ✓ Hotel Accommodations
- ✓ 9 Meals
- ✓ Sightseeing & Entrance Fees
- ✓ All Taxes and Tips, Including Guide & Driver

Level 2

Casual Wanderer

Comfortable with 2-3 miles of walking daily, varied terrain, and moderate hills; handles two flights of stairs.

TOUR ITINERARY

Day 1 - Friday, July 3- Boston, MA- Depart from Baton Rouge airport. Arrive in Boston, MA. Enjoy an included dinner and presentation on Boston and its history by a local historian. (D)

Day 2 - Saturday, July 4-Boston- After breakfast, we board the motorcoach to attend the 2026 **Harborfest at Faneuil Hall** Marketplace and enjoy lunch on your own. This evening we will enjoy a leisurely cruise down the **Charles River,** where we also anchor in **Boston Harbor** to listen to the **Boston Pops Orchestra** and watch the **Boston Pops Fireworks** Spectacular. (B)

Day 3- Sunday, July 5- Boston- After breakfast, we will meet our local guide and begin exploring the **Freedom Trail**. We will visit the **Paul Revere House** and **Old North Church**. You will enjoy lunch on your own at Hub Hall. After lunch, we explore Beacon Hill and visit the USS Constitution Museum. This evening, we will experience **View Boston**- A 360 observation deck offering views from high above the heart of Boston. (B)

Day 4, Monday, July 6- Boston- After breakfast we arrive at Boston Harbor for a **Whale Watching cruise** to Stellwagen Bank Marine Sanctuary. After lunch on your own at High Street Place Food Hall, we will depart for a guided tour and tasting at **Samuel Adams Boston Brewery**. This evening is an included dinner at **Bertucci's Italian Restaurant**.(B, D)

Day 5- Tuesday, July 7- Boston- Today, we step back in time with a visit to **Plimoth Patuxet Museum**. This historical site is as it was in the 17th century. After an included lunch, we will go aboard the **Mayflower II** and walk over to **Plymouth Rock**. This afternoon, we will visit the **Boston Tea Party Ships and Museum.** Enjoy a farewell lobster dinner at Boston's oldest restaurant, **Union Oyster House.** (B,L, D)

Day 6- Wednesday, July 8- Boston- We head home with many wonderful memories made. (B)

Boston Pops

HIGHLIGHTS

- Freedom Trail
- USS Constitution
- Whale Watching Cruise
- Boston Pops Orchestra and Fireworks Spectacular
- Paul Revere House
- Samuel Adams Brewery
- Plimoth Patuxet Museum and Plymouth Rock

$200 per person required to reserve space, refundable until April 23, 2026, when full payment is due.
Make check payable to ZACHARY TRAVEL CENTER – 4257 Church St., Ste. 104, Zachary, LA 70791 - or register online at zacharytravel.com. Bank drafts and credit card payments are accepted.
All payments are non-refundable after the final payment date. 3% surcharge on credit card payments, no surcharge on bank drafts. Travel insurance is strongly recommended.

Scan the QR code to register online!

Document: 7/31/25

ZACHARY
Travel & Cruise Center

AIR

TOUR REGISTRATION

Enclosed is my $_____ per person deposit for the _____ tour.

Have you traveled with us before? YES NO If yes, is all information on file current? YES NO
(If No, please fill out the following completely. If Yes, please fill out your name, indicate your insurance preference, sign the waiver, and submit with your deposit.)

Name_____ Birthdate_____ Name on Name Tag _____

Address_____ City_____State_____Zip_____

Email_____ Cell_____

Do you wish to receive updates on our tours and services via email? YES NO

Roommate_____ Birthdate_____ Roommate Name Tag _____

Emergency Contact:_____ Phone:_____ Relationship: _____

List all medical/mobility issues: _____ List all food/dietary restrictions:_____

Airport preference:_____ Interested in upgrading? Premium Economy Business/First Class

Hotel Preference: One Bed Two Beds | Air Seating Preference: Aisle Middle Window

IMPORTANT INFORMATION ABOUT TRAVEL INSURANCE: We strongly recommend purchasing travel insurance to protect your trip investment. Our group policy covers pre-existing conditions and is based on your tour price. Insurance must be purchased by the final payment deadline. Contact our office or refer to your tour itinerary for pricing.

☐ No, I decline ☐ Yes, I am interested in purchasing ☐ Unsure

- **Deposit of $500/person for international tours, $200/person for domestic air tours required, refundable until final payment deadline. Make your check payable to ZACHARY TRAVEL CENTER.**
- **All payments are non-refundable after the final payment date. Bank drafts or credit card payments available via our website. 3% surcharge on credit card payments.**
- **Trip cancellation insurance is strongly recommended.**
- **REAL ID or passport now required for all domestic flights. Passport required for destinations outside U.S. Must be valid for six months beyond travel dates. Please submit color copy to office. Email ztc@zacharytravel.com or text to 225.228.1283.**
- **Some international destinations may require visas for an additional cost.**

Responsibility and Disclaimer Statement for Tours and Travel Booked with Zachary Travel

By signing below, I authorize Zachary Travel ("Agency") to make travel bookings on my behalf. I acknowledge that travel plans may be interrupted or canceled by suppliers, government entities, or third parties beyond the Agency's control. In such cases, I understand that the supplier's cancellation, rebooking, and refund policies, as governed by applicable law, will dictate my rights, including any refund. If I choose to purchase travel insurance, coverage will depend on the policy terms. I agree to hold the Agency harmless from any liability, including monetary losses, arising from travel interruptions or cancellations for myself or anyone in my booking. This waiver applies to all future bookings with the Agency and remains on file.

Name (print full name(s)): _____

Signature: _____

Date: _____

Return this completed form with your deposit by mail (address below) or via our website at zacharytravel.com
Zachary Travel & Cruise Center | 4257 Church St., Ste. 104 | Zachary, LA 70791
Questions? Call 225.654.9210 or email ztc@zacharytravel.com

ZACHARY
Travel & Cruise Center

TRAVEL INSURANCE PURCHASED STATEMENT/TRAVEL INSURANCE WAIVER

Please check the option below that applies, sign and submit. This must be done for each tour you take with our agency.

TOUR/TRIP: _____

⬜ **I plan to purchase travel insurance through Zachary Travel or already have.**

Name (print full name): _____

Signature: _____

Date: _____

Policy Number: _____

⬜ **I have purchased travel insurance through another company outside of Zachary Travel.**

Name of Travel Insurance Company: _____

Date of Purchase: _____

Name (print full name): _____

Signature: _____

Date: _____

⬜ **I hereby decline the trip cancellation insurance offered to me by Zachary Travel.**

I understand that should I need to cancel for any covered reason, which includes medical or death for my spouse, members of my immediate family (children, grandchildren, aunts, uncles, brothers, sisters, nieces and nephews) or myself, that I could lose up to 100% of the cost of my cruise/tour/vacation package/travel arrangements and I am comfortable with taking that risk by not purchasing travel insurance.

I also understand by not purchasing travel insurance that I can lose all benefits of coverage for missed connection, travel delay, lost luggage, air ambulance for medical emergency as well as emergency medical and dental coverage. I am aware that my own medical insurance may not cover me outside of the United States.

I understand that Zachary Travel holds no responsibility in this matter, as they have advised me of the importance of such insurance. I do not expect Zachary Travel to assist me in any way in recouping these lost funds should I have to cancel my trip.

With my signature below, I confirm that I am denying travel insurance for myself and for anyone else included in my reservation or booking:

Name (print full name): _____

Signature: _____

Date: _____

This form must be signed and returned in order to travel with Zachary Travel