

# Ark Encounter & Creation Museum

**Tour includes:**

- Deluxe motor coach transportation
- 1 night hotel accommodations at the Hampton Inn & Suites located at the Ark Encounter
- 3 meals (1B-1L-1D)
- Admission to the Ark Encounter & Creation Museum
- All taxes and fees
- Baggage handling
- All gratuities for driver, baggage handling and included meals

**Itinerary:**

**Day 1:**

- 7:00am - Depart Valley City for The Ark Encounter, Williamstown, KY
- Rest and quick meal break made en route (meal on own)
- 12:00pm - Arrive at the Ark Encounter - Allow 4-5 hours
- Buffet dinner included at Emzara's Restaurant
- Afterwards, check into the hotel for the night

**Day 2:**

- Breakfast at the hotel
- 8:00am - Luggage pick up
- 9:00am - Depart the hotel for the Creation Museum
- 10:00am - Arrive Creation Museum - Allow 4-5 hours  
- Lunch included at the Museum
- 3:00pm - Depart for Valley City, OH
- Rest and quick meal break made en route home (meal on own)
- 8:30pm - Approximate arrival time back in Valley City

**Pricing:**

- \$392 per person double occupancy
- \$520 per person single occupancy

**Payment Info:**

To secure your reservation, complete the attached form and send to Nowak Tours, 1395 Barn Run Drive, Valley City, OH 44280. Full payment due by April 10, 2026. Make checks payable to Nowak Tours. Prefer to pay by credit/debit card, call Nowak Tours at 330-483-4900. (3% fee applies)

## RESERVATION FORM

▶ Enclosed is my check in the amount of \$ \_\_\_\_\_ for \_\_\_\_\_ person(s).

**1 Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_  
(as on ID)                      First                      Middle                      Last

**Preferred First Name:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**2 Traveling Companion:** \_\_\_\_\_ **DOB:** \_\_\_\_\_  
(as on ID)                      First                      Middle                      Last

**Preferred First Name:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Address (Passenger #1):** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Phone:** (    ) \_\_\_\_\_

**Special Needs / Dietary Restrictions:** \_\_\_\_\_