




# I'M IN THE DARK!



American Bank &  
American State Bank  
Member FDIC

## A TOTAL SOLAR ECLIPSE MYSTERY

April 5-10, 2024



We're heading somewhere interesting on this five-night mystery tour to an out-of-state locale! We're keeping you in the dark except to say we will be in the dark during a total solar eclipse! As for the rest of the itinerary, "it's that one place with the one thing in that one town!" At departure you'll receive a clue on what direction we are heading and maybe even the state (if we're feeling generous). Clues will be given along the way to keep you guessing. Just expect the unexpected and get ready to open your eyes to amazing experiences and destinations you might otherwise have overlooked!

### TERMS & CONDITIONS

For full tour terms and conditions, please visit [www.stardestinations.com/terms-american-mystery](http://www.stardestinations.com/terms-american-mystery)

## INCLUSIONS

- Private motorcoach transportation
- 5 nights' accommodations
- 13 meals (5 breakfasts, 3 lunches, 5 dinners)
- Admission to attractions as stated on itinerary
- Porter service of one bag per person at hotels (if available)
- Taxes and gratuities for included services

### Not included in the price of this tour:

Meals/beverages other than those listed on the itinerary, beverages other than tea/coffee/water with included meals, items of a personal nature/souvenirs, phone calls and faxes from hotels, travel protection plan, fees related to any COVID-19 requirements for this destination, and any service not listed in the above inclusions.

### 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

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**

## TOUR PRICING

**\$1,599 per person, double**

**\$1,955 per person, single**

## OPTIONAL TRAVEL PROTECTION

**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:**

**\$207 per person, double or single**

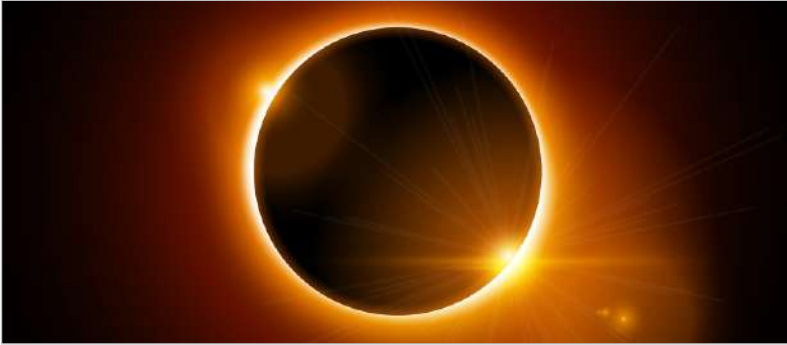
(Payment may be sent with your deposit or with final payment to American State Bank)

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

To view state specific fraud warnings, visit:

<https://www.travelexinsurance.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.travelexinsurance.com/customer-service/travel-alerts/travel-supplier>.

Visit <https://travelexinsurance.com/docs/ny-phn-covid-19-comp> to view a special notice for NY residents regarding coverage related to COVID-19. Traveler Insurance Services, Inc. CA Agency License #0D10209. Travel Insurance is underwritten by Berkshire Hathaway Specialty Insurance Company; NAIC #22276. 716



**A \$250 deposit per person is required with your registration form in order to reserve your spot:**

**FINAL PAYMENT IS DUE:**  
**FEBRUARY 5, 2024**

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**April 5-10, 2024**

## PASSENGER INFORMATION (1st Traveler)

(Name must be written here as it appears on your government-issued ID)

First Name: \_\_\_\_\_

Middle Name(s): \_\_\_\_\_

Last Name(s): \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Gender (circle one): M F

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
month / day / year

Dietary Needs: \_\_\_\_\_

Additional Special Requests/Needs: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

Emergency Contact's Phone: \_\_\_\_\_

## PASSENGER INFORMATION (2nd Traveler)

(Name must be written here as it appears on your government-issued ID)

First Name: \_\_\_\_\_

Middle Name(s): \_\_\_\_\_

Last Name(s): \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Gender (circle one): M F

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
month / day / year

Dietary Needs: \_\_\_\_\_

Additional Special Requests/Needs: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

Emergency Contact's Phone: \_\_\_\_\_

Sleeping Preference (circle one): Two Beds One Bed

Roommate (name): \_\_\_\_\_

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 Travellex Insurance Services.

- ☐ Yes, I would like to purchase the offered plan.  
\$207 per person, double or single  
(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: \$1,599 Single: \$1,955

To view state specific fraud warnings, visit: <https://www.travellexinsurance.com/company/fraud-warning>.  
Travellex Insurance Services Inc. ("Travellex Insurance") maintains an updated list of alerts and financial defaults on its website available at <https://www.travellexinsurance.com/customer-service/travel-alerts/travel-supplier>.

Visit <https://travellexinsurance.com/docs/ny-phn-covid-19-comp> to view a special notice for NY residents regarding coverage related to COVID-19. Travellex Insurance Services, Inc. CA Agency License #0D10209. Travel Insurance is underwritten by Berkshire Hathaway Specialty Insurance Company; NAIC #22276. 716

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**

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

**PLEASE TURN OVER FOR SIGNATURE**

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**DOCUMENTATION:** A current government-issued photo ID is required for this trip.

**OPTIONAL TRAVEL PROTECTION PLAN:** American Bank and American State Bank recommends 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 Travelex 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.travelexinsurance.com/GPB-0521>. To view state specific fraud warnings, visit: <https://www.travelexinsurance.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 Travelex 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. Travelex Insurance Services, Inc. CA Agency License #0D10209. Travel Insurance is offered on behalf of and under the direction of Travelex Insurance Services. Travel Insurance is underwritten by Berkshire Hathaway Specialty Insurance Company; NAIC #22276. 7D4

**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 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 or delay of baggage, 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 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 air fare, volatile fuel prices, government taxes and charges, exchange rate fluctuations, or other tour-related tariffs or newly announced travel costs. In the current travel environment, pricing may be increased due to unexpected requirements for health and safety of tour members. Due to infectious diseases, including COVID-19, destination areas may implement restrictions and requirements that may add additional costs beyond our control. Be aware that any public interaction carries a risk of exposure to infectious diseases. Travelers assume personal risk upon tour registration, and SDI cannot be held responsible in the event of infectious disease exposure. 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 to 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 \$250 deposit per person is required with your registration form in order to reserve your spot.**

**FINAL PAYMENT IS DUE: FEBRUARY 5, 2024**

**DEPOSIT PAYMENT INFORMATION:**

Enclosed is my check, 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.*



#### PLAN BENEFITS & BONUS COVERAGES

Benefits	Coverage <sup>1</sup>
Trip Cancellation	100% of trip cost (\$20,000 limit)
Trip Interruption	150% of trip cost (\$30,000 limit)
Trip Delay <sup>8</sup>	\$1,000 (\$250/day)
Sporting Equipment Delay	\$200
Missed Connection	\$1,000
Baggage & Personal Effects	\$1,500
Baggage Delay	\$250
Emergency Medical & Dental Expenses	\$50,000 (\$500 dental sublimit)
Emergency Evacuation & Repatriation	\$250,000
Accidental Death & Dismemberment <sup>5</sup>	\$10,000
Travel Assistance & Concierge Services <sup>7</sup>	Included

#### BONUS COVERAGES

If plan is purchased at or before final trip payment.

• Pre-existing Medical Condition Exclusion Waiver	Included
• Financial Default Coverage	Included

## 360° GROUP PREMIER

### TRAVEL PROTECTION

The 360° Group Premier plan provides maximum travel protection for all ages at competitive group rates. Enjoy benefits like trip cancellation & interruption, emergency medical and 24/7 travel assistance & concierge services.

#### PLAN HIGHLIGHTS

- Primary coverage, no deductibles
- Pre-existing medical condition exclusion waiver<sup>3</sup>
- Trip cancellation/interruption benefit includes:
  - Sickness, injury or death<sup>4</sup>
  - Inclement weather
  - Financial default<sup>3</sup> & labor strikes
  - Business reasons
  - Terrorist incident
- 3 hour missed connection benefit
- 5 hour trip delay benefit
- 12 hour baggage delay benefit
- Fast online claims<sup>6</sup>

#### PLAN RATES

Trip Cost	Age 25+
\$0 <sup>2</sup>	\$43
\$1 - \$500	\$80
\$501 - \$1,000	\$116
\$1,001 - \$1,500	\$160
\$1,501 - \$2,000	\$207
\$2,001 - \$3,000	\$280
\$3,001 - \$4,000	\$370
\$4,001 - \$5,000	\$464
\$5,001 - \$6,000	\$552
\$6,001 - \$7,000	\$644
\$7,001 - \$8,000	\$736
\$8,001 - \$9,000	\$826
\$9,001 - \$10,000	\$916
\$10,001 - \$11,000	\$1,038
\$11,001 - \$12,000	\$1,135
\$12,001 - \$13,000	\$1,232
\$13,001 - \$14,000	\$1,329
\$14,001 - \$15,000	\$1,426
\$15,001 - \$16,000	\$1,524
\$16,001 - \$17,000	\$1,623
\$17,001 - \$18,000	\$1,721
\$18,001 - \$19,000	\$1,819
\$19,001 - \$20,000	\$1,918

Rates are per traveler and subject to change. Contact the agency for rates under 25 years of age.

<sup>1</sup> All coverages per insured up to limits listed. Coverage, rates and maximum trip length may vary by state. Please see your policy for details or call 888.574.7026. <sup>2</sup> Includes \$1,000 in Trip Interruption - Return Air only. Coverage for Trip Interruption and Trip Interruption - Return Air Only cannot be combined. <sup>3</sup> Coverage when plan is purchased at or before final trip payment. <sup>4</sup> Of you, a Traveling Companion, Family Member or Business Partner. <sup>5</sup> Not available for NH residents. <sup>6</sup> Based on industry average. Fastest payment on approved claims is based on 'electronic payment' of claim. <sup>7</sup> Provided by the designated provider as listed in the Policy. <sup>8</sup> \$200/day for IL residents 09.21



## TRAVEL ASSISTANCE SERVICES<sup>7</sup>

Includes a wide range of services before and during trips through a 24/7 toll free number.

### MEDICAL SERVICES INCLUDE:

- Medical Assistance
- Medical Consultation & Monitoring
- Medical Evacuation
- Emergency Medical Payments
- Prescription Assistance
- Dependent Transportation & Family Visits
- Repatriation of Remains

### ASSISTANCE SERVICES INCLUDE:

- 24 Hour Legal Assistance
- Message Services
- Language Interpretation Services
- Emergency Cash Transfer
- Pre-Trip Travel Services
- Travel Document & Ticket Replacement
- Concierge Services
- Business Services

### PRE-EXISTING CONDITION EXCLUSION WAIVER

Pre-existing medical conditions are eligible for coverage when:

- Plan is purchased at or before final trip payment
- Full trip cost is insured
- The traveler is medically able to travel at the time of plan purchase

A pre-existing condition is an Injury, Sickness or other condition (excluding any condition from which death ensues) of an Insured, Traveling Companion, Business Partner or Family Member within the 60 day period immediately preceding and including the Insured's coverage effective date.

This exclusion also applies to those not traveling.

This plan does not cover any loss caused by or resulting from: intentionally self-inflicted Injury, suicide, or attempted suicide of the Insured, Family Member, Traveling Companion or Business Partner while sane or insane; Normal Pregnancy or Childbirth, other than Unforeseen Complications of Pregnancy, of the Insured, a Traveling Companion or a Family Member; participation in professional athletic events; motor sport, or motor racing, including training or practice for the same; mountain climbing that requires the use of equipment such as; pick-axes, anchors, bolts, crampons, carabineers, and lead or top-rope anchoring or other specialized equipment; operating or learning to operate any aircraft, as student, pilot, or crew; air travel on any air-supported device, other than a regularly scheduled airline or air charter; war (whether declared or not) or act of war, participation in a civil disorder, riot, insurrection or unrest; any unlawful acts committed by the Insured; Mental, Nervous or Psychological Disorder; if the Insured's tickets do not contain specific travel dates (open tickets); being under the influence of drugs or narcotics, unless administered upon the advice of a Physician or intoxication above the legal limit; any Loss that occurs at a time when this coverage is not in effect; traveling solely or substantially for the purpose of securing medical treatment; any Trip taken outside the advice of a Physician; Pre-Existing Medical Conditions of an Insured, Traveling Companion, Business Partner or Family Member (within a 60 day period immediately preceding coverage effective date). The following exclusions also apply to the Medical Expense Benefit: routine physical examinations; mental health care; replacement of hearing aids, eye glasses, contact lenses, sunglasses; routine dental care; any service provided by the Insured, a Family Member, or Traveling Companion; alcohol or substance abuse or treatment for the same; Experimental or Investigative treatment or procedures; care or treatment which is not Medically Necessary, except for related reconstructive surgery resulting from trauma, infection or disease; coverage for Trips less than 100 miles from the Insured's Primary Residence (also applies to the Emergency Evacuation Benefit). The following exclusions also apply to Accidental Death and Dismemberment: Benefits will not be provided for the following: loss caused by or resulting directly or indirectly from Sickness or disease of any kind; stroke or cerebrovascular accident or event; cardiovascular accident or event; myocardial infarction or heart attack; coronary thrombosis; aneurysm. Please refer to your policy for a complete list of plan exclusions and limitations. 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 Travellex 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. The product descriptions provided here are only brief summaries and may be changed without notice. The full coverage terms and details, including limitations and exclusions, are contained in the insurance policy. If you have questions about coverage available under our plans, please review the policy or contact Travellex Insurance Services Inc. Toll Free 888.574.7026 Email: [customersolutions@travellexinsurance.com](mailto:customersolutions@travellexinsurance.com). Any inquiry regarding claims may be directed to [travellex.claims@bhspecialty.com](mailto:travellex.claims@bhspecialty.com); 855.205.6054. To view state specific fraud warnings, visit [travellexinsurance.com/company/fraud-warning](http://travellexinsurance.com/company/fraud-warning). Consumers in California may also contact: California Department of Insurance Hotline 800.927.4357 or 213.897.8921. Travellex Insurance Services, Inc. CA Agency License #0D10209. Consumers in Maryland may contact: Maryland Insurance Administration 800.492.6116 or 410.468.2340. Travel Insurance is underwritten by Berkshire Hathaway Specialty Insurance Company; NAIC #22276 under Policy Form series (all states except as otherwise noted) PG-TA-IPL-USE. In KS, MA, MN, MO, MT, OR, VA, and VT Policy Form series PG-TA-IPL-NV. In CA Policy Form # PG-TA-IPL-USEIM and PG-TA-IPL-CAEAH, CO Policy Form # PG-TA-IPL-COEAH and PG-TA-IPL-COEIM, IL Policy Form # PG-TA-IPL-ILE, IN Policy Form # PG-TA-IPL-INEAH and PG-TA-IPL-NVIM, MD Policy Form # PG-TA-IPL-MDE, NH Policy Form # PG-TA-IPL-NHE, NY Policy Form # PG-TA-IPL-NVIM and PG-TA-IPL-NVAH-NY, PA Policy Form # PG-TA-IPL-USEIM and PG-TA-IPL-NVAH-PA, TX Policy Form # PG-TA-IPL-TXEAH and PG-TA-IPL-TXEIM, UT Policy Form # PG-TA-IPL-UTE, WA Policy Form # PG-TA-IPL-NVIM and PG-TA-IPL-WAEAH. SDH 09.21



For plan questions call Travellex at 888.574.7026 or  
Contact your Travel Professional to Enroll:  
Plan # GPB-0521

### VIEW PLAN DETAILS

View your policy: [policy.travellexinsurance.com/GPB-0521](http://policy.travellexinsurance.com/GPB-0521)



**Travellex Insurance Location Number: 15-0153**

**PO Box 456 / 1903 N US Hwy 71 / Carroll, IA 51401**

**Office 800-284-4440 or 712-792-9793**

**[www.stardestinations.com](http://www.stardestinations.com)**



**Dream. Explore.  
Travel On.**