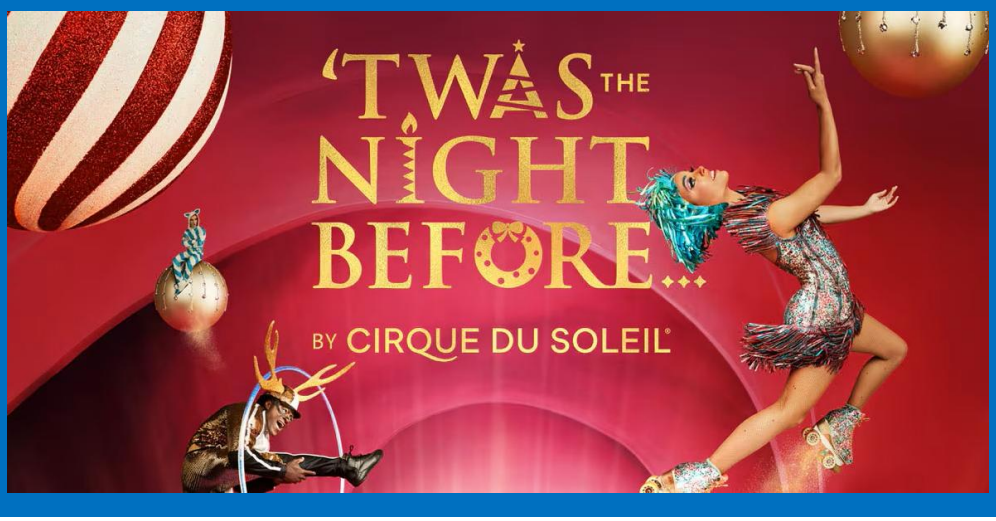
‘TWAS THE NIGHT BEORE – BY CIRQUE DU SOLEIL

FOX THEATRE, ATLANTA, GA | DECEMBER 12, 2026 | TRIP #28423

EXCURSIONS UNLIMITED BY KELLY TOURS | 2788 US HWY 80 W, GARDEN CITY, GA | (912) 964-2010

A thrilling interpretation of the well-known holiday classic, ‘Twas the Night Before…, as only Cirque du Soleil could conjure it, is returning to The Fox Theatre Atlanta. This joyful show about the virtues of generosity and friendship promises to leave a lasting impression on families this holiday season. ‘Twas the Night Before…, Cirque du Soleil’s first-ever holiday production, is a whirlwind of love, holiday cheer, riotous fun, and adorably endearing characters that will establish a new tradition for families to treasure. Lunch is included on the drive to Atlanta before the 4:00pm curtain with Orchestra Seating. A boxed dinner is also included on our way back home.



PACKAGE PRICE
$269.00 per person

Deposit:
$269.00 per person due upon booking

INCLUDES:
Transportation roundtrip by motorcoach, Excursions Unlimited by Kelly Tours tour escort, all tours and admissions listed, meals as listed, all taxes, and travel arrangements

DEPARTURE POINTS
Kelly Tours Garden City, GA
Burlington Savannah Ctr., GA
Metter, GA
Dublin, GA

Other pick-up points may be available dependent on routing. Please call office for options

COACH TRANSPORTATION
Coaches will be thoroughly cleaned and sanitized prior and during each trip & hand sanitizer stations will be placed at bus loading areas and will be available onboard.

Passengers must follow local guidelines laid down by the venues and locations visited.

TOUR ESCORT
An Excursions Unlimited by Kelly Tours travel representative will accompany the group to all destinations to oversee the trip and take care of all travel arrangements and details.

TO CONFIRM RESERVATIONS
Reservations will be accepted on a 1st come 1st serve Basis. It is important that reservations and deposits be made at the earliest possible date to ensure availability of a particular tour. Reservations will not be accepted without initial deposits.

www.KellyTours.com
(800) 442-6152
KellyTours@KellyTours.com

PAYMENTS
Credit card payments can be made online at www.KellyTours.com or by phone (800) 442-6152. Make check payments payable to Kelly Tours and mail to your local office address.

SAVANNAH, GA
2788 US Hwy 80 W
Savannah GA 31408

CHARLESTON, SC
6484 Savannah Hwy.
Ravenel, SC 29470

FINAL LETTER
A final trip letter will be provided three weeks prior to the trip outlining pick up and drop off points, departure and return times, hotel details, a current itinerary and any local Covid 19 restrictions.

CANCELATION
On multi-day bus tours not involving flights, there is no cancellation penalty if a trip is cancelled before the final payment due date minus any vendor payments which are unrecoverable. There is a 100% cancellation penalty if a trip is cancelled within 45 days of trip departure. On multi-day bus tours involving flights, deposits are refundable 75 days or more prior to departure minus any vendor deposits which are unrecoverable. On Cruise & International Trips, deposits are refundable 95 days or more prior to departure, minus any vendor deposits which are unrecoverable. Day trip payments are non-refundable but are transferable one time as a credit on account, minus the cost of shows or event tickets if unrecoverable.

LIABILITY & INDEMNIFICATION
By booking, financially committing to and physically traveling on a trip with Kelly Tours, passenger(s) do so at their own risk and will indemnify Kelly Tours and Kelly Tours employees in totality against any claim(s) resultant to any actual or perceived harm caused by potential exposure to Covid 19. In addition, passenger(s) will not hold Kelly Tours or Kelly Tours employees liable for any actual or perceived harm caused by potential exposure to Covid 19 during a trip.

Cut across this line and send form in with payment

'Twas The Night Before – Fox Theatre **December 12, 2026** **Trip#28423**

Name _____

Birthday _____ Male _____ or Female _____

Address _____

City, State, Zip _____

Home# (_____)_____ Cell# (_____)_____

All receipts are sent by email. Email _____

Emergency Contact #1 Name _____ Phone# (____)_____

Emergency Contact #2 Name _____ Phone# (____)_____

Food Allergy or special need _____