



# ***Ethiopia***



***Visa & Passport***

***Information Enclosed***

# TOURIST VISA REQUIREMENTS FOR ETHIOPIA

**Total cost  
One person  
\$152**

**Total cost  
Two people  
\$267**

For FedEx *Priority Delivery* please add \$10.00 to above costs.  
For delivery outside the continental U.S. please add additional \$35.00.

### Please Send to GENERATIONS VISA SERVICE: (see address below)

- \_\_\_ Your **signed** passport: having **one completely blank "visa"** page & **six** months validity beyond the travel date. If you need help securing, renewing or updating your passport, including adding extra visa pages, please contact GenVisa at 1-800-845-8968 for requirements and fees.
- \_\_\_ **One (1)** recent passport **photo** per person (approx 2x2) – no home photos / no photocopies.
- \_\_\_ **One (1)** completed and signed **visa application** form per person (attached).
- \_\_\_ Copy of round trip **airline tickets or itinerary**, or letter of confirmation from travel agent.
- \_\_\_ **Payment:** a check or money order payable to: **Generations Visa Service** (U.S. Dollars) or  
Credit Card information: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Complete and *return this entire form* with the requested materials – use prepaid FedEx Airbill enclosed.

For the nearest to you FedEx drop off location, please call 1(800)GOFEDEX.

**Important: Do not send your passport/materials more than 6 months prior to your trip date.**

If you need your passport **within 14 days:** add \$35 per person for expedited service. If you are departing **within 5 days:** call GenVisa prior to sending the materials. If you are a non-US citizen, call for entry requirements.

### **YOUR RETURN SHIPPING ADDRESS – No P.O. boxes, please**

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

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

Return to:  Home or  Business (Name & c/o): \_\_\_\_\_

**EXACT** address: \_\_\_\_\_ Apt/Ste#: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**Date you need your passport:** \_\_\_\_\_ Your E-mail address (**Important**): \_\_\_\_\_

Date **THIS TOUR** Departs U.S.: \_\_\_\_\_

**Optional insurance:** \$8.00 per passport: in the unlikely event that your passport is lost or damaged in transit. This will

cover your full out of pocket and replacement costs up to \$2,000. Please check one of the boxes below.

**Yes**, I have added an additional \$8.00 per person for the optional insurance. [FedEx signature will be required]

**No**, I decline the optional insurance and understand that in the unlikely event my passport is lost or damaged, Generations Visa Service and FedEx liability is limited to \$100. [No FedEx signature required upon delivery]

Send materials to:  
GENERATIONS VISA SERVICE  
2233 WISCONSIN AVE N.W. #226  
WASHINGTON D.C. 20007-4119  
1-800-845-8968

Cox & Kings – Ethiopia - 2010





PLEASE TYPE OR PRINT YOUR ANSWER IN THE SPACE PROVIDED BELOW EACH ITEM.

FIRST NAME.....		MIDDLE NAME.....		LAST NAME.....	
SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		DATE OF BIRTH D.../M...YY.....		COUNTRY OF BIRTH.....	
PRESENT NATIONALITY..... ANY OTHER.....					
PASSPORT TYPE <input type="checkbox"/> ORDINARY <input type="checkbox"/> TRAVEL DOCUMENT <input type="checkbox"/> SERVICE <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> ALIEN <input type="checkbox"/> OTHER.....					
<input type="checkbox"/> PASSPORT NUMBER..... ISSUE DATE D.../M.../Y..... EXPIRATION DATE D.../M.../Y.....					
HOME /MAILING ADDRESS.....					
CITY/TOWN.....		STATE/REGION.....		ZIP/POSTAL CODE.....	
DAY TEL.....		EVENING TEL.....		FAX.....	
COUNTRY.....					
E-MAIL.....					

**CHILDREN/ DEPENDANTS ON THE SAME PASSPORT**

FIRST NAME	MIDDLE NAME	LAST NAME	SEX	BIRTH DATE (D/M/Y)	BIRTH PLACE
1					
2					
3					
4					
5					

DO NOT WRITE IN THIS SPACE  
FOR OFFICIAL USE ONLY/ TO BE FILLED AT HEAD OFFICE

DATE OF ENTRY.....	PORT OF ENTRY.....	VISA NUMBER.....	VISA TYPE.....
PLACE OF ISSUE.....	DATE OF ISSUE.....	EXPIRATION DATE.....	
ADDRESS IN ETHIOPIA: HOTEL.....	TEL.....	CONTACT PERSON.....	TEL.....

**CURRENT REQUEST**

PLACE OF REQUEST.....	REQUESTED VISA TYPE.....	DURATION (#DAYS).....	<p><b>PHOTO</b> Attach one passport size photograph WRITE YOUR NAME ON THE BACK OF THE PHOTOGRAPH</p>
ENTRIES: <input type="checkbox"/> SINGLE <input type="checkbox"/> DOUBLE <input type="checkbox"/> MULTIPLE	NUMBER OF SUPPORTING DOCUMENTS.....		

**TO BE COMPLETED BY PROXY/ GUARDIAN**

FIRST NAME.....	MIDDLE NAME.....	LAST NAME.....			
SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	CONTACT PERSON/ ORGANIZATION.....				
REGION.....	ZONE.....	K.KETEMA (WOREDA).....	KEBELE.....	HOUSE #.....	TEL.....

I THE UNDERSIGNED DECLARE THAT ALL THE ABOVE MENTIONED STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE

_____	_____
FULL NAME & SIGNATURE	DATE