



Ethiopia



Visa & Passport

Information Enclosed

TOURIST VISA **REQUIREMENTS FOR ETHIOPIA**

Total cost
One person
\$154

Total cost
Two people
\$269

Cost includes service fees, consular fees* and return shipping
For delivery **outside the contiguous U.S.** please add additional \$35.00.
For **FedEx Overnight** Delivery please add \$10.00 to above costs.

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.

If no Airbill provided please subtract \$19 from the total cost for one way shipping.

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 \$45 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 (**recommended for security reasons**) 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 damage 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





PLEASE TYPE OR PRINT YOUR ANSWER IN THE SPACE PROVIDED BELOW EACH ITEM. REQUEST No. _____

FIRST NAME MIDDLE NAME LAST NAME

SEX MALE FEMALE DATE OF BIRTH *D*...../*M*...../*YY*..... COUNTRY OF BIRTH

CURRENT NATIONALITY ORIGINAL NATIONALITY (NATIONALITY AT BIRTH)

PASSPORT TYPE ORDINARY SERVICE DIPLOMATIC TRAVEL DOCUMENT OTHER

PASSPORT NUMBER ISSUE DATE *D*...../*M*...../*YY*..... EXPIRATION DATE *D*...../*M*...../*YY*.....

HOME/MAILING ADDRESS

CITY/TOWN STATE/REGION ZIP/POSTAL CODE COUNTRY

DAY TEL. EVENING TEL. FAX E-MAIL

CURRENT OCCUPATION

PURPOSE OF TRAVEL TOURISM/FAMILY VISIT BUSINESS OFFICIAL TRANSIT OTHER

DATE OF DEPARTURE FROM USA DATE OF ARRIVAL IN ETHIOPIA BORDER OF FIRST ENTRY

DURATION OF STAY IN ETHIOPIA ENTRIES: SINGLE DOUBLE MULTIPLE

ADDRESS IN ETHIOPIA HOTEL: HOTEL NAME
 HOTEL TELEPHONE NUMBER

CONTACT PERSON IN ETHIOPIA
 TELEPHONE NUMBER

FAMILY ACCOMMODATION: CITY REGION
 ZONE K. KETEMA (WOREDA)
 KEBELE HOUSE No.
 TELEPHONE

PHOTO
 ATTACH ONE
 PASSPORT SIZE
 PHOTOGRAPH.
 WRITE YOUR NAME ON
 THE BACK OF THE
 PHOTOGRAPH.

CHILDREN/DEPENDENTS ON THE SAME PASSPORT

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

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

APPLICANT'S NAME APPLICANT'S SIGNATURE DATE

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

VISA NUMBER VISA TYPE DATE OF ISSUE EXPIRATION DATE

PROCESSED BY NAME SIGNATURE DATE

APPROVED BY NAME SIGNATURE DATE