



# ***Uganda***



***Visa & Passport***

***Information Enclosed***

# TOURIST VISA REQUIREMENTS FOR UGANDA (Single Entry)

**Total cost  
One person  
\$134**

**Total cost  
Two people  
\$229**

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.
- \_\_\_ **Two (2)** recent passport **photo(s)** per person (approx 2x2) – no home photos / no photocopies.
- \_\_\_ **Two (2)** completed and signed **visa application** forms per person (attached).
- \_\_\_ International **Certificate of Vaccination for Yellow Fever.**
- \_\_\_ 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 7 days:** add \$75 per person for expedited service. 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 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





THE REPUBLIC OF UGANDA
VISA APPLICATION

SERIAL NO : ( Please do not write in this space, for official use only)

1. Last Name (Family Name):

2. Other Given Names:

3. Former Name(s) if applicable:

4. Permanent Address:

a. Telephone No (s): Home: ( ) Work: ( )

Cell phone (optional): ( )

b. E-mail address:

5a. Nationality: 5b. Current Occupation:

6. Date and Place of Birth (Day, Month, Year, Place of Birth)

7. Marital Status: (check/tick one) Married Single Divorced

8. Other family members accompanying applicant:

(N.B. Each traveling family member must have a separate application filled out for them)

Table with 3 columns: Name, Date of Birth, Passport number. Rows for Spouse, Child, Child, Child.

9. Passport No: Date of Issue (Day, Month, Year) Expiry date (Day, Month, Year)

Type of Passport (check/tick one) Diplomatic Official Ordinary

10. Type of Visa required (check/tick one)

Transit Single Entry Multiple Entry (Six Months) Multiple Entry (12 Months)

11. Category of Visa (check/tick one)

Tourist Holiday visit Business Student Govt. Business

12. Proposed Date of Arrival in Uganda: ...../...../.....  
Day Month Year

Planned duration of Stay in Uganda: .....

13. Reason for the Journey: .....

14. Date(s) of any Previous Visit(s) to Uganda: .....

15. Any contact person in Uganda:

a. Name: .....  
First Last/Family Name

b. Phone: ..... c. email:.....

16. Full address where you intend to stay while in Uganda: .....  
.....

17. If in Transit:

a. Indicate your ultimate destination: .....

b. Have you obtained a visa for country of destination? .....

Applicant's Signature: ..... Date: ...../...../.....  
Day Month Year