



Zimbabwe



Visa & Passport

Information Enclosed

TOURIST VISA
REQUIREMENTS FOR ZIMBABWE
(single entry)

Total cost
One person
\$144

Total cost
Two people
\$249

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).
- ___ 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 3 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 \$65 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**): _____

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 - Zimbabwe - 2012





ZIMBABWE VISA APPLICATION

DATE-STAMP

To be completed in English (in block capitals) by each adult requiring a visa

1. Surname (Mr./Mrs./Miss) Sex 2. First names 3. Date of birth Place of birth 4. Present nationality: Previous (as per passport) 5. Passport number Place of issue Date of issue Date of expiry			Official use only																			
6. Particulars of wife/husband (who must complete a separate application if travelling) (a) Surname (b) First names (c) Date of birth Place of birth																						
7. Particulars of children under 18 who will accompany the applicant. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">Full names</th> <th style="width: 20%;">Place of birth</th> <th style="width: 20%;">Date of birth</th> <th style="width: 20%;">Passport No.</th> </tr> </thead> <tbody> <tr><td>.....</td><td>.....</td><td>.....</td><td>.....</td></tr> <tr><td>.....</td><td>.....</td><td>.....</td><td>.....</td></tr> <tr><td>.....</td><td>.....</td><td>.....</td><td>.....</td></tr> <tr><td>.....</td><td>.....</td><td>.....</td><td>.....</td></tr> </tbody> </table>				Full names	Place of birth	Date of birth	Passport No.
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8. Applicant's present occupation

9. Purpose of visit

10. Normal residential address

11. Proposed address in Zimbabwe (include name of person or business to be visited if applicable)

12. Period of visit intended: From To

13. Please complete but do not detach: Receipt No.

APPLICANT'S DETAILS

Surname

First names

Date and place of birth

Accompanying children under 18.

Names	Date of birth
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.....
.....
.....

OFFICIAL USE ONLY
VISA AUTHORITY

VISA APPLICATION (continued)

- 14. Intended place of entry into Zimbabwe
- 15. Dates of previous entries into Zimbabwe
- 16. Address to which visa should be sent
- 17. Any criminal convictions sustained by applicant are to be detailed below. (Minor infringements of by-laws may be ignored.)

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Note.—All visitors to Zimbabwe must be in possession of return tickets (or funds in lieu) and sufficient funds to support themselves. The granting of a visa is not a guarantee of entry, and holders are also required to comply with the requirements of the Immigration Act, 1979.

<p>Signature of applicant</p> <p>Date Place</p>	<p>OFFICIAL USE ONLY</p>
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Your application will only be processed if this form is FULLY completed.

When completed this form should be dispatched by Air Mail to **THE CHIEF
IMMIGRATION OFFICER, PRIVATE BAG 7717, CAUSEWAY, ZIMBABWE**

DO NOT FORGET to complete the address box below—your visa will be sent to this address.



DO NOT DETACH

1. Write the name and address you wish the visa to be sent to in the box opposite →
2. DO NOT DETACH this Form.
3. This Form will be returned to you with the visa authority endorsed thereon.

Name
Address

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