

Eritrea Visa Instructions for Adventure Center Clients

G3 Visas & Passports
3300 North Fairfax Dr., Ste 220
Arlington, VA 22201
Tel: (888) 883-8472, (703) 276-8472
Fax: (703) 524-3374
Email: info@g3visas.com

Please send the following to G3 Visas & Passports:

1. **Please submit your original valid and signed passport** (The passport must have at least one blank visa page for the visa and must be valid for 6 months from the end of your trip).
2. One visa application form completed and signed.
3. One 2" x 2" passport size photograph.
4. Non US citizens submit valid I-94 or a copy of your Alien Registration Card.
5. Copy of flight itinerary from Adventure Center.

Please send this sheet with all fields completed; only one is required per family.

Contact and Shipping Information:

(Street Address Only, NO P.O. BOXES)

Name _____

Address _____

City _____

State _____

Zip Code _____

Tel # _____

Fax # _____

Date of Birth _____

Passport # _____

Date Departing US _____/_____/_____

Date Passport Needed _____/_____/_____

Email Address : _____

(We will email you the tracking number when your visas are complete.)

Shipping Fees:

All return shipping fees are included. Your passport will be returned via Federal Express. Federal Express cannot deliver to P.O. Boxes; please provide your home street address or work address.

Fees:

Payment includes Embassy fee, service fee, and return shipping via Federal Express. **Visas will take three weeks to process.**

One entry with 90 day stay \$ 112.00

This visa is valid for 3 months from the date of issue

Number of Travelers x \$112.00 \$_____

- Please submit an **expedite fee of \$40.00 per traveler** if you require your passport returned **in less than three weeks.**
- Consular fees subject to change without notice.

Payment Information:

All fees are payable to G3 Visas by:

- American Express
- Visa/MasterCard
- Check/Money Order

Requirements and fees are subject to change without prior notice.

I authorize G3 Visas to charge the amount of \$_____

plus a 5% processing fee to my credit card number

Expiration date _____/_____/_____ Security Code _____

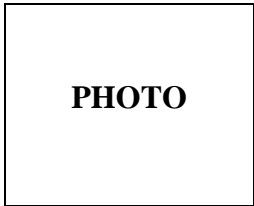
Signature of cardholder _____

11/2009

*



EMBASSY OF THE STATE OF ERITREA



APPLICATION FOR ENTRY VISA

1. Full Name (as in passport) _____ 1.1 Sex _____
Full Name Father's Name Grand Father's Name
- 1.2 Former Name (if any) _____
2. Place and date of birth _____ 3. Occupation/Profession _____
4. Present Nationality _____ 4.1 Nationality by birth _____
5. Passport type _____ 5.1 Passport No. _____
- 5.2 Place and date of issue _____ 5.3 Valid until _____
6. Marital status _____ 6.1 Name of spouse (if married) _____
7. Permanent address _____ 7.1 Telephone _____ (home)
 _____ 7.2 Telephone _____ (work)
8. Purpose of entry Tourism Official Transit Business Employment Student Other
9. Entry desired Single Multiple 10. Expected date of arrival _____ 10.1 Period of stay _____
11. Addresses in Eritrea _____ 11.1 Telephone in Eritrea _____
12. Reference in Eritrea _____ 12.1 Telephone of Reference _____
13. Place and date of previous visits to Eritrea _____
14. Name of person traveling on the same passport _____

No.	Full Name	Sex	Place and Date of Birth

I declare that the information given above is correct and complete to the best of my knowledge.

Place _____ Date _____ Signature _____

FOR OFFICIAL USE ONLY			
Decision Taken _____	Entry/Visa No. _____	Sticker# _____	
Date of issue _____	Date of Expiration _____	Receipt # _____	
Remarks _____	Name and Signature of Authority _____		