

VISA ORDER FORM VISAS & PASSPORTS 2 GO, INC.

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(please complete one form per traveler)

APPLICANT INFORMATION:							
Traveler's Last Name:			First Name:	Company	Company Name:		
Street Address:			City:	State:	ZIP Code:	ZIP Code:	
Day Phone No:			Fax No:	Email Address:			
Departure Date:			Need By Date:				
SHIP MY COMPLETE	D PASSPORT	TO:	(CHECK IF SAME AS ABOVE)				
In Care of Name:				Company Name:			
Street Address:			City:	State:	ZIP Code:	ZIP Code:	
Day Phone No:			Fax No:	Email Add	nail Address:		
VISA SERVICE REQUEST(S):							
COUNTRY	PURPOSE (tourist, business, etc)	#OF ENTRIES (single, double, multiple)		DESCRIPTION* r, next day, regular, etc.) *Please note: some s may not offer same day or next day service.		PROCESSING FEES (see visa guide)	
2.							
3.							
SHIPPING SERVICES: FOR RETURN OF YOUR COMPLETED PASSPORT OR VISA REQUESTS							
\$48 Mon-Fri Expedited 1-2 day delivery, up to 3 passports, excludes: AK, AZ, CA, HI, NV, WA \$58 Mon-Fri Expedited 1-2 day delivery, up to 3 passports, for: AK, AZ, CA, HI, NV, WA, OR \$69 Sat Delivery, if available \$89 Mon-Fri First Overnight delivery, if available					Shipping Fees:		
Check here if you want your package delivered without a signature					Total Fees:		
PAYMENT INFORMATION:							
Cardholder's Name:				Card Type:	ard Type:		
Card Number:				Expiration Date:			
Billing Address:			City:	State: Z	IP Code:		
Cardholder's Signature: Payment Card Security Code:							

IMPORTANT INFORMATION:

VP2GO acts only as an agent and accepts no responsibility for any delays, damages, or loss of documents/passports by the embassy, or any courier, delivery and postal services. Issuance of a visa is a decision of the country to which application is made. VP2Go assumes no liability for a country's decision or for delays encountered in processing an application.