# TOURIST VISA REQUIREMENTS FOR

Egypt E-Visa (S/E 90-Day Validity) & Jordan E-Visa (S/E 60-Day Validity)

\$ 102 p/person (2 visas) Consular fees: GenVisa service fees: \$ 98 p/person (2 visas) **Total Cost: \$200 One Person** 

Consular fees: \$ 102 p/person (2 visas) GenVisa service fees: \$ 98 p/person (2 visas) **Total Cost: \$400 Two People** 

Cost includes service fees, consular/government fees\*, and return by email.

Please Send to C	<b>SENERATIONS</b>	VISA SERVICE:	(see address below	)
Perfect COLOR copy of has at least one complete or updating your passport Two (2) recent high reso One completed and signed For three months doubled For three months multiper Prepaid self-addressed for Payment: a check or month a check or month send your processing generally takes uperson for expedited service. Citizen, please contact Generally the change without notice. For the	ly blank "visa" page, please contact Ger lution, professiona ed visa application for le-entry Jordan vistole-entry Egypt vistost-class mail enverney order payable our passport/materiup to 3-4 weeks. If The requirements visa for additional	& six months remaining a visa at 1-800-845-896 al, passport type pictured from per person per course from the date of issues a from the date of issues a from the date of issues at from the date of issues and the date of issues are for U.S passport information. *Consular	y validity. If you need help 8 for requirements and fee es per person. DO NOT Sontry - single sided page (see add \$30 per person be add \$35 per person be are and drawn on a US be prior to your Jordan trip eas within 14 days: add holders only. If you are a fees and forms are subtractions.	securing es.  TAPLE! attached).  our receipt ank. date.  \$90 per a non-US oject to
•		ns, current requireme online at <b>www.genv</b> i	• •	paaiea
YOUR	CONTAC	CT INFORM	IATION	
Last Name:		First Name:		
Last Name:		First Name:		
EXACT address:		Apt/Ste#:	Phone:	
City:	State:	Zip Code:		
Date you need your E-Visa:	Your E-mail a	ddress ( <b>Important</b> ):		
Date YOU Depart the U.S.:				
Date you enter Jordan		Date you enter Egypt		
Optional LIFETIME Passport I passport is lost or damaged, Genv see the Passport Insurance page for Yes, I have added an addition insurance. No, I decline the Li	isa will arrange for or or details (included i al \$29.99 per person	expedited passport replant the visa kit) and <u>choo</u> for the Lifetime Exped	se one of the boxes below. ited Passport Replacement	es. Please

Mail materials to:

**GENERATIONS VISA SERVICE 2233 WISCONSIN AVE N.W. #405 WASHINGTON D.C. 20007-4151** 1-800-845-8968

Gate 1 – Jordan/Egypt E-Visas



## Embassy of the Arab Republic of Egypt سفارة جمهورية مصر العربية



Visa Application Form استمارة طلب التأشيرة

PERSONAL INFORMATION									
Name: First/Middle/Last (As in Passport)									PHOTO Colored Photo with
Date & Place of Birth									White Background
Gender:	□ <b>F</b>		Marital Stat	us:					Size: 2"x 2"
<b>Current Nationality</b>	USA								Taken within the last 6 months
Nationality at Birth	USA								
			PASSPORT	DET	AILS	<u> </u>			
Passport Type & No.	P		Place of Issue		US.	DEPT OF STATE			
Date of Issue				Date	of Ex	xpir	·y		
		CO	NTACT INF	ORM	IATI	ON	<u>1</u>		
Duggent Addugge	Street								
Present Address:	City				Sta			Zip c	ode
Phone Number:	one Number: Email Add			dre	ss:				
		<u>OCC</u>	UPATION I	NFOR	RMA	TI(	<u>ON</u>		
Job Title / Occupation	- F								
Company / Organization Name:									
Address & Phone No.									
	•		<b>DETAILS</b>	OF V	<u>ISA</u>				
Visa Type Requested (Select One)	□ Tourist	□ Tourist □ Entry/ Bus		siness		□ Diplomatic			□ Official
Number of Entries	□ Single Entry	□ Single Entry			□ Multiple Entries		es		
	DETAILS OF VISIT								
Port of Entry: CAIF						Date of Departure		3	
Address in Egypt:									
Name of Relatives or Friends in Egypt  Addresses of Relatives or Friends in Egypt									
1- N/A N/A									
2- N/A N/A									
<u>DETAILS OF PREVIOUS VISITS</u>									
Date(s) of Any Previo	(s) of Any Previous Visits Purpose of Visit(s) Address in Egypt During Previous Stay to Egypt		ng Previous Stay						
1- N/A	N/A			N/A					
<b>2-</b> N/A		N/A					N/A		
Other Information N/A									
Signature					ate				

#### LETTER OF UNDERSTANDING

Dear GenVisa Clients, as your business is very important to us and to avoid any misunderstanding on visa processing times, please read this letter very carefully, sign, date, and include with the rest of your documents.

The purpose of this letter is to give you a better understanding of Jordan E-Visa processing times. Jordan E-Visa has a limited, 60-day validity from the day the Embassy approves it. For us to ensure that your visa remains valid during your entire stay in Jordan, the earliest we can present your application to the Embassy is 50 days prior to your expected entry date into the country. For example, if you enter Jordan on June 1st, 2024 your application can only be submitted to the Jordanian Embassy after April 10th, 2024. Submitting your application before that date will result in a visa expiring before your trip even begins.

If you send your documents too early, please expect additional processing time to ensure the full visa coverage of your stay.

If you made other travel arrangements that require you to have the passport well before your trip to Jordan, please consider other validity options for the visa. For example, you can obtain a double entry visa with 90-day validity, which will allow the submission to the Embassy 80 days prior to your expected entry date into Jordan. **Double Entry 90-day validity E-Visa is \$30 more than the Single Entry 60-day E-Visa.** 

By signing this letter, you agree and acknowledge:

- time constraints in submitting Jordanian Visa applications
- opportunity to upgrade visa validity to allow faster turnaround
- submitting your documents too early will result in longer processing time

Name (print name as in passport):	
Signature and Date:	

Each applicant must include a signed copy of this statement with their Jordan visa application. If you have any questions, please contact GenVisa Team at 1-800-845-8968

# Embassy of

## Visa Applica

f the Hashemite Kingdom of Jordan		
604 International Dr. N. W.		
Washington, DC. 20008		
cation for US. & EU countrie	es	
	<u></u>	
ıl:	Last name:	
Passport number:		
Place issued:		

First name:	Middle initial:	Last name:			
Birth date:	Passport number:				
Place of Birth:	Place issue				
Citizenship: Date issued:					
Original nationality	Occupation:				
Street address:	•				
City:	State:	Zip Code #			
Cell:	Phone No: (H)	Phone No: (W)			
E-mail Address:		,			
Purpose of visit:					
Port of entry:					
Expected date of departure from the US:					
Expected date of arrival in Jordan:					
Expected date of difficultification	I				
Kindly note: (The visa fees are not refundable).					
Annaly note. The visu jees are not rejunadorej.					
I certify that all the statements given by me are truthful, and I am aware of all regulations stated above.					
		Date:			
		Signature:			
<u> </u>					



#### LIFETIME US PASSPORT REPLACEMENT INSURANCE FOR \$29.99 PER PERSON

This affordable passport replacement program offers **expedited** replacement of your lost, stolen, or damaged US passport—**up to \$399 in replacement service fees**. Upon receipt of your claim, we will arrange for the fastest available turnaround to process your passport replacement application under specific circumstances.

#### By enrolling, you agree to the following:

- ✓ GenVisa will waive its expedited processing fees. You are responsible for applicable Government and shipping fees only.
- ✓ GenVisa will select the fastest available processing speed based on your scheduled departure date.
- ✓ Coverage does not include replacement of expired passports, passports that ran out of visa pages, name changes, or valid travel visas.
- ✓ Coverage cannot exceed our service fee for an EMERGENCY passport at the time of the claim.

#### Insurance coverage excludes:

- ✓ Replacement of expired passports, passports that ran out of visa pages. name changes, or valid travel visas.
- ✓ Replacement of lost, stolen, or damaged passports while outside the United States and its territories. Should that happen, you must apply in person at the nearest US Embassy for an emergency passport.

To make a claim, please call (800) 845-8968 or email us at info@genvisa.com.

### Optional LIFETIME Passport Replacement insurance: \$29.99 per passport.

In the unlikely event that your passport is lost or damaged, Genvisa will arrange for expedited passport replacement in the United States.

Please choose one of the boxes below.

No, I decline the Lifetime Passport Replacement insurance.

Yes, I have added an additional \$29.99 per person for the Lifetime Passport Replacement insurance. Please include insurance fees in the total payment for visa processing.

Name and Signature:

Date:



# **Smart Traveler Enrollment Program**

"Stay Informed, Stay Connected, Stay Safe!"

For a nominal fee Generations Visa Service will register you and your travel details with the nearest U.S. Embassy or Consulate in the countries you are visiting. This registration allows the US government to efficiently safeguard its citizens while overseas.

#### **Benefits of Enrolling in Smart Traveler Enrollment Program:**

Traveler #1's full name (LAST, First, Middle):

- Receive important information from the Embassy about up-to-the-minute safety conditions in your destination country, helping you make informed decisions about your travel plans.
- Help the U.S. Embassy contact you in an emergency, whether natural disaster, civil unrest, or family emergency.

Traveler #2's full name (LAST, First, Middle):

• Help family and friends get in touch with you in the case of an emergency.

## Personal Information (Pease fill out legibly in block letters)

Date of Birth (MM/DD/YYYY):	Date of Birth (MM/DD/YYYY):
Gender: Male Female	Gender: Male Female
Passport Number: P	Passport Number: P
Email Address*:	Email Address*:
Phone Number:	Phone Number:
*Email addresses will not be used for solicitation purposes	
<u>Travel 1</u>	<u>Information</u>
Country #1:	Country #2 (if applicable):
Approx. Date of Entry (MM/DD/YYYY):	Approx. Date of Entry (MM/DD/YYYY):
Approx. Date of Exit (MM/DD/YYYY):	Approx. Date of Exit (MM/DD/YYYY):
Name and Address of the first hotel:	Name and Address of the first hotel:
Name of the Tour Operator: Gate1 Travel	Name of the Tour Operator: Gate1 Travel
(215) 572-7676	(215) 572-7676
Yes, please enroll me in Smart Traveler Program. I	have added an additional <b>\$15.00 per person</b> for this service.
Please include STEP enrollment fees in the total	payment for visa processing.

Please note: If you receive an email confirmation from the Department of State titled "Smart Traveler Enrollment Program Invitation," one of our agents has enrolled you in the Program with the information provided. No further action is necessary on your part.