

# TOURIST VISA REQUIREMENTS FOR BRAZIL E-VISA

Total cost: One person - \$89

Total cost: Two people - \$178

Cost includes service fees, government fees\* and return delivery by email

## Please Send to GENERATIONS VISA SERVICE: (see address below)

High Resolution color copy of the data page of your passport, with at least six months remaining validity beyond the travel date. If you need help securing, renewing or updating your passport, please contact GenVisa at (800) 845-8968 for requirements and fees.

Clear, High Resolution Passport Photo taken within 6 months on complete white background without any shadows – 2"x 2", front view, no smiling and no glasses.

For minors applicants, please also include the following paperwork:

- A clear, high resolution color copy of BOTH parents' passport bio/data page.
- One (1) passport photo per EACH parent, MUST satisfy the photo requirements above.
- Minor travel consent letter, completed and signed by both parents (attached).

Brazil ETA Request Form (attached).

Payment: a check or money order payable to GenVisa in US Dollars and drawn on a US bank or

I authorize GenVisa to charge my credit card for the following payments (**please add 3 % credit card transaction fee to the total amount**): \$ \_\_\_\_\_ US Dollars.

By signing below, I understand and acknowledge the charges in the amount listed above. I acknowledge payment in full is to be made when billed or in extended payment in accordance with the standard policy of the company issuing the credit card. I waive my right to dispute these charges.

For security reasons this information will not be stored by GenVisa.

Card # \_\_\_\_\_ CC Holder Name: \_\_\_\_\_

Card Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Complete and **return this form** with the requested materials to GenVisa to the address below.

**Important:** Do not send your passport/materials more than 6 months prior to your trip date. An E-Visa is an official authorization for a visit to Brazil for tourism or business purposes, visa is valid for 2 years or until passport expiration date from the date of issue for multiple entries of up to 90 days per visit. The E-Visa is submitted online with the E-Visa approval communicated via email. You MUST carry the E-Visa approval with you at all times.

Processing takes up to 3 weeks. If you need your E-Visa within 7 business days of submission (subject to approval): add \$35 per person for expedited service. These requirements are for nationals of United States, Canada, Australia and Japan. For all other nationalities please contact GenVisa for entry requirements and fees. \*Government fees are subject to change without notice. For terms and conditions, current requirements, processing times, updated forms and fees please check online at [www.genvisa.com/](http://www.genvisa.com/) followed by the name of your tour operator

## YOUR CONTACT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Return to:  Home or  Business Name & c/o: \_\_\_\_\_

**EXACT** address: \_\_\_\_\_ Apt/Ste#: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date you need your E-Visa: \_\_\_\_\_ Date THIS TOUR Departs U.S.: \_\_\_\_\_

**Your E-mail address (Important):** \_\_\_\_\_ (please write in block letters)

Send materials to:

**GENERATIONS VISA SERVICE**  
2233 WISCONSIN AVE N.W. #311  
WASHINGTON D.C. 20007-4119  
1-800-845-8968



# Brazil E-Visa Request Form (please fill out legibly in block letters)

## Traveler Details (as in passport)

Last Name:

First Name:

Middle Name:

Street Address (No P.O. Boxes):

City:

State:

Zip Code:

Primary Phone Number:

Alternate Phone Number:

Work Phone Number:

Gender:

Marital Status:

Date of Birth:

Place of Birth (City, State, Country):

Former Names:

Are you a current or former Brazilian National: Yes  No  If yes, please contact GenVisa for additional info

Email Address:

Primary Occupation:

Monthly Income (**REQUIRED**):

## Travel Information

Date of Departure from United States:

Date of Arrival in Brazil:

Date of Departure FROM Brazil:

Purpose of Visit: Tourism  Business

## Travel History

Have you ever had a denied Brazilian Visa? ( if yes, please provide details):

Have you ever been expelled or deported from Brazil? ( if yes, please provide details):

Have you ever been accused of practicing terrorist acts, genocide, crimes against humanity, war crimes or crimes of aggression in the term established by the Rome Statute of the International Crime Court? ( if yes, please provide details):

Have you ever been arrested or convicted for any offense or willful crime, even though subject of a pardon, amnesty, or other similar action? ( if yes, please provide details):

Have you ever had your name included in a sanction list by Brazilian government or by an international organization? ( if yes, please provide details):

Have you ever violated the principles or the objectives of the Brazilian Federation Constitution? ( if yes, please provide details):

Have you ever had a restraining order or protective order against you, related to a person who currently is in Brazil? ( if yes, please provide details):

Do you have a communicable disease of public health significance? ( if yes, please provide details):

Have you ever been unlawfully present, overstayed the amount of time granted by an immigration official or otherwise violated the terms of a Brazilian visa? (if yes, please provide details):

**Please note:** for travel into Brazil, the traveler must carry an original, signed passport valid for 6 months beyond his or her stay in Brazil, with at least one blank visa page. Amendments and Endorsements pages in the back of the passport are not suitable for visa placement. The Brazil E-Visa is electronic and will not be stamped inside the passport. The E-Visa is submitted online with the E-Visa approval communicated via email. You MUST carry the E-Visa approval with you at all times.



### Consent Letter for Minors Applying for a Brazilian Visa

To Whom It May Concern,

I/We, \_\_\_\_\_

[Full Name(s) of Custodial and/or Non-Custodial Parent(s)/Legal Guardian(s)] am/are the lawful custodial parent and/or non-custodial parent(s) or legal guardian(s) of:

Child's full name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Passport Number: \_\_\_\_\_

Date of Issue of Passport: \_\_\_\_\_

\_\_\_\_\_, (Child's Full Name) has my/our consent to apply for a Brazilian Visa and to travel to Brazil.

**Signature(s) of person(s) giving consent:**

Full Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Full Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_



# 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:**

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

### **Personal Information (Please fill out legibly in block letters)**

Traveler #1's full name (LAST, First, Middle):
Date of Birth (MM/DD/YYYY):
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
Passport Number: P_____
Email Address*:
Phone Number:

Traveler #2's full name (LAST, First, Middle):
Date of Birth (MM/DD/YYYY):
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
Passport Number: P_____
Email Address*:
Phone Number:

\*Email addresses will not be used for solicitation purposes

### **Travel Information**

<b>Country #1:</b>
Approx. Date of Entry (MM/DD/YYYY):
Approx. Date of Exit (MM/DD/YYYY):
Name and Address of the first hotel:
Name of the Tour Operator:

<b>Country #2 (if applicable):</b>
Approx. Date of Entry (MM/DD/YYYY):
Approx. Date of Exit (MM/DD/YYYY):
Name and Address of the first hotel:
Name of the Tour Operator:

**Yes, please enroll me in Smart Traveler Program. I have added an additional \$15.00 per person for this service. Please include STEP enrollment fees in the total payment for visa processing. Use Credit Card payment option below ONLY if you are applying for STEP enrollment separately on its own:**

Card Holder Name: \_\_\_\_\_ Signature \_\_\_\_\_  
 Credit Card Number: \_\_\_\_\_ Security Code: \_\_\_\_\_ Expires: \_\_\_\_/\_\_\_\_  
 Billing Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**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.**