# **TOURIST VISA REQUIREMENTS**

### FOR VIETNAM (Single Entry) and CAMBODIA

Total cost - One person - \$351

Total cost - Two people - \$654

Co	ost includes service fees, consular fees* and <b>return</b> shipping via secure, traceable FedEx service For the <b>Overnight Return Delivery</b> upgrade please add \$15.00 per address. For FedEx delivery outside the <b>contiguous</b> U.S. please add \$55.00.
	Please Send to GENERATIONS VISA SERVICE: (see address below)
	Your <u>SIGNED</u> passport: having three (3) <u>completely blank</u> "visa" pages & six months remaining validity. For help securing or renewing please contact GenVisa at 800-845-8968 for requirements and fees.
	Three (3) recent professional passport pictures per person (2" x 2"). Paper clip to the application forms!
	One completed online, printed, and signed application form per person. Vietnam application must be submitted online via the following link: <a href="http://visa.mofa.gov.vn">http://visa.mofa.gov.vn</a> by clicking on <a href="fllt.form">FILL FORM</a> . Signed physical copy of the application should be sent to GenVisa with the rest of the required documents Note place of visa submission and collection should be VIETNAM EMBASSY IN THE UNITED STATES OF AMERICA. For manually completed application form (ATTACHED) include additional \$49 fee per person - application refilling fee.
	A copy of itemized cruise/flight itinerary in each traveler's name, showing all entry and exit points.
_	Copy of medical travel protection plan with minimal coverage of \$10,000, including Covid-19. <b>Payment</b> : a check or money order <u>payable</u> to <b>GenVisa</b> <u>in US Dollars and drawn on a US bank.</u>
	Complete and return this entire form with the requested materials – use secure traceable delivery

Visa processing generally takes about 6 weeks. If you need your passport returned within 30 days: add \$90 per person for expedited service, within 21 days: add \$150 per person for expedited service. \*Consular fees, processing times and forms are subject to change without notice. For current

Important: Do not send your passport/materials more than 4 months prior to your trip date.

requirements, terms and conditions updated forms and fees please check at: www.genvisa.com/globus, www.genvisa/avalon, www.genvisa.com/cosmos or www.genvisa.com/monograms

## YOUR RETURN SHIPPING ADDRESS

Last Name:		First Name:First Name:		
Last Name:				
Return to: Home or Busine	ss ( <b>recommended for sec</b>	curity reasons) Name &	& c/o:	
EXACT address:		Apt/Ste#:	Phone:	
City:	State:	Zip Code:		
Date you need your passport:	Your E-mail address	ss (Important):		
Date You Depart the US:	Date you Enter	Vietnam:	Date you Enter	Cambodia:
Optional insurance: \$12.00 per pa out of pocket direct visa(s) and passpo Yes, I have added an addition No, I decline the optional insu	ort replacement costs up to sal \$12.00 per person for	\$2,000. Please check one the optional insurance	of the boxes below. . [FedEx signature	e required upon delivery.]
Generations Visa Service liability		-	, i	
Mail materials to:		G	lobus Family – V	ietnam SE/Cambodia

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



PLEASE USE THIS FORM ONLY IF YOU CHOSE WHITE GLOVE TRANSCRIBING SERVICE FOR \$49

Visa Approval/Reference Number (if any):



EMBASSY OF VIETNAM 1233 20<sup>th</sup> Street, NW, Suite 400 Washington, D.C. 20036

Tel: (202) 861-0737 & (202) 861-2293 Fax: (202) 861-0917 http://www.vietnamembassy.us

### VISA APPLICATION

(FOR NON-VIETNAMESE PASSPORT HOLDERS)

01 Photo
(2 inches x 2 inches)
Glued photo here
01 additional photo
stapled to this form for a
loose -leaf visa request

Fa	ımily name	First name	Middle name
Date of birth:		10. Name, address o hotel) in Viet	f your contact (sponsor, honam (if any) TH GLOBUS FAMILY OF BRANDS
Male:  Fema	ale 🗆	PREPAID TOUR WIT	TH GLOBUS FAMILY OF BRANDS
Place of birth:			
Nationality at birth:		•••••	
Nationality at present:			
Passport number:		•••••	
Date of issue:			
Date of expiry:		11. Proposed date of	•
Profession:			' Month / Year
Place of employment:	•••••		
		Proposed date of	/
T-11 (OCC:)			······································
Telephone (Office):		12. Requesting a vis	
Present mailing address: (P.O Bo	X NOt	• Times of entries:	a good for.
Accepted for USPS express mail)		- Single (one time)	wigit 🗵
		- Multiple visits	Ц
		• <u>Length of stay:</u>	_
* Email :		- One month	x
* Telephone :		- 03 months	
Purpose of visit to Vietnam:		- Less than 6 Month	s (with an approval only)
TOURISM		- Un to one year (w	vith an approval only)
		op to one year (n	

<sup>\*</sup> Required for further contact

**ROYAL EMBASSY OF CAMBODIA** TO THE UNITED STATES OF AMERICA 4530 16th Street N.W.

Washington D.C. 20011

https:/www.embassyofcambodiadc.org



\* Required

TOURIST (VISA-T)

# KINGDOM OF CAMBODIA Nation — Religion — King

## - only one (1) photo

- taken within six (6) months

2 x 2 Photo

- Glue or staple the photo both sides (Left & Right)
- Do not use paper clip

VISA APPLICATION FORM		
Tourist (T	ype-T) Visa	
	Employer:	

LAST NAME:*		Employer:		
FIRST NAME:*		Current Home Address:		
GENDER:* ☐ MALE ☐ FEMALE				
DATE OF BIRTH* DAY/ MONTH	/ YEAR	Mobile number:*		
BIRTH NATIONALITY*		Alternative contact number:		
PRESENT NATIONALITY:*		Email address:		
PLACE OF BIRTH*		Port of Entry: (Int'l Airport)* Phnom Penh Siem Reap Sihanoukville		
PASSPORT NUMBER:*		or other Port of Entry:		
PLACE OF ISSUE:*		Address where you will stay in Cambodia?  Have you ever been in Cambodia?		
DATE OF ISSUE:*				
DATE OF EXPIRATION:*				
(Approximate date of entry only from A to B)		to Cambodia? Yes No If Yes, What reason?		
Date A: DAY/ MONTH/ Y Date B: DAY/ MONTH/ Y	YEAR	Your answer will not affect your visa application.		
LENGTH OF STAY IN CAMBODIA:		VACCINATION STATUS?		
VISA INFORMATION  1. This is valid to use or to enter Cambodia within three(3) months from the date of issued and allowed to stay for 30 days upon entering Cambodia.  2. Visa is renewable for another 30 days at the Cambodia Immigration Office.  3. It is only a single-entry visa.  4. It is a sticker visa and needed to affixed to your passport visa page.		Are you fully vaccinated? Yes No Vaccine Type?  Do you have the vaccination card or certificate? Yes No  Did you take your booster shot? Yes No  CAMBODIA ARRIVAL PROCEDURE  Use your phone camera to scan the QR Code —>>> or visit the Embassy website link below.  https://www.embassyofcambodiadc.org/arrival-procedure.html		
FOR OFFICIAL USE ONLY (052022-1)  DATE PROCESSED:	knowledge.  **Parent or guardi	at the information on this form is true and correct to the best of my an can sign on behalf of the child (minor).  lete name and relation.		
VISA NUMBER:				
REMARKS:		*Print your complete name with signature and 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	
Travel 1	<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: Globus Family	Name of the Tour Operator: Globus Family
(866) 755-8581	(866) 755-8581
Yes, please enroll me in Smart Traveler Program. I Please include STEP enrollment fees in the total	have added an additional \$15.00 per person for this service.  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.