# TOURIST VISA REQUIREMENTS FOR CAMBODIA

Total cost - One person - \$157

Total cost - Two people - \$266

	t includes service fees, consular fees* and <b>roundtrip</b> shipping via secure, traceable FedEx service.  se use the following link to print the pre-addressed, prepaid FedEx label: <a href="http://returns.nrgsoft.com/genvisa.php">http://returns.nrgsoft.com/genvisa.php</a> For the <b>Overnight Return Delivery</b> upgrade please add an additional \$15.00 per address.  For delivery outside the <b>contiguous</b> U.S. please add an additional \$90.00.
	Please Send to GENERATIONS VISA SERVICE: (see address below)
-	Your <u>SIGNED</u> passport: having one <u>completely blank</u> "visa" page & six months validity beyond the travel date. If you need help securing or renewing your passport, please contact GenVisa at 800-845-8968 for requirements and fees.
_	One (1) recent passport photo per person – no home photos / no photocopies.
_	One (1) completed and signed visa application forms per person (enclosed).
_	A copy of your <b>flight itinerary</b> or tour letter listing name of the traveler and flight information.
_	Payment: a check or money order <u>payable</u> to <b>GenVisa</b> in US Dollars and drawn on a US bank.
	Complete and return this entire form with the requested materials – use <u>prepaid FedEx Label</u> .  Important: <u>Do not</u> send your passport/materials more than 3 months prior to your trip date.

Processing takes 3-4 weeks. If you need your passport within 21 days: add \$45 per person for expedited service. If you are departing within 14 days: add \$75 per person for expedited service. \*Consular fees and forms are subject to change without notice. For current requirements, terms and conditions, updated forms and fees please check at: <a href="https://genvisa.com/monograms/">https://genvisa.com/monograms/</a>

## YOUR RETURN SHIPPING ADDRESS

Last Name:	me: First Name:				
Last Name:	t Name: First Name:				
Return to: Home or Business (re	commended for security reason	ns) Name & c/o:			
EXACT address:		Apt/Ste#:	Phone:		
City:	State:	Zip Code	:		
Date you need your passport:	Your E-mail address (Imp	oortant):			
Date THIS TOUR Departs the U.S.:					
your full out of pocket visa(s) and pa	ssport replacement costs up \$9.00 per person for the opti nce and understand that in th	to \$2,000. <u>Please</u> onal insurance. [Fine unlikely event n	edEx signature required upon delivery.] ny passport is lost or damaged;		

Mail materials to:

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





## Helpful information for completing Cambodia application

Passport of traveling document is valid for (country) ... **USA** for **US** citizens

Date of entry to Cambodia: Day....Month...Year... Please provide the date of <u>expected</u> arrival into Cambodia. Cambodia visa is issued for three months validity and it is OK to approximate.

Date of departure (length of stay) ... Please indicate the total <u>expected</u> length of stay in the country. Cambodia visa is issued for three months validity and it is OK to approximate.

Point of entry: ...Please indicate a port of arrival/border crossing into the territory of Cambodia. (Siem Reap for example)

Means of Transportation: ... Please specify how you arrive in Cambodia: **by plane**, by boat, by bus etc.

Point of exit: ... Please indicate a port of departure/border crossing from the territory of Cambodia. (Phnom Penh for example)

Means of Transportation: ... Please specify how you depart from Cambodia: by plane, by boat, by bus etc.

Address during the visit... For land tours please provide 1 name of the hotel, for river cruises please state: *on board cruise ship (name of the ship).* 

For hotel contact information please refer to the Globus Family of Brands Hotel information list below

Phnom Penh	Juliana Hotel	
	Raffles Hotel Le Royal	
	Sunway Hotel	
Siem Reap	Borei Angkor Hotel	
	Raffles Grand Hotel d'Angkor	
	Tara Angkor Hotel	
	Victoria Angkor Resort & Spa	

Organization, persons to be visited: N/A

## **ROYAL EMBASSY OF CAMBODIA** TO THE UNITED STATES OF AMERICA

□ Official

□ Diplomatic

4530 16<sup>th</sup> Street N.W.

Washington D.C. 20011

Purpose of Visit\*

□ Tourist

202-7267742 www.embassyofcambodia.org 9:00-12:00pm / 1:00-4:00pm Monday to Friday

#### (\*) required information

## KINGDOM OF CAMBODIA

Nation - Religion - King



**VISA APPLICATION FORM** 

2 x 2

One (1) Passport picture

Recent at least six (6) months

Securely Attached Paste or Stapled L/R (side-to-side)

Business Other	(Please Specify)				
Last Name: *					
First Name: *			Current Home Address: *		
Gender: *	Jan - Feb - Mar - Apr May - Jun - Jul - Aug Sep - Oct - Nov - Dec Month		Mobile Phone: *	☐ Yes ☐ No	
		L hereby	declare that all information on	this form are true and correct	
FOR OFFICIAL USE ONL	.Y:	THETEDY	acciare that an information on	ans form are true and correct.	
DATE PROCCESSED					
VISA NUMBER				*Signature	
TYPE OF VISA			*Applicant Ful	I Name in print & Date Signed	



# **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 I</u>	<u>nformation</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 p	nave added an additional \$15.00 per person for this service.  ayment 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.