TOURIST VISA REQUIREMENTS: Australia, New Zealand & Indonesia

New Zealand ETA, Indonesia S/E E-Visa

Government Fees:	$121	Government Fees:	$242
Discounted GenVisa fees:	$138	Discounted GenVisa fees:	$276
Total Cost for one person:	$259	Total Cost for two people:	$518

Cost includes **service fees** and **consular fees*.** Visas will be emailed to you upon approval. You must print and present them when you travel.

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

__ ***A High-resolution COLOR copy of the passport data page***, made using a copy machine or scanner. Your passport should have six months remaining 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. **No cellphone pictures!**

__ ***Two (2) recent high resolution, professional, passport photos*** per person. **No homemade photos!**

__ ***Indonesia E-VOA Form signed and dated***, per applicant.

__ ***New Zealand NZeTA Application & Declaration Form***, signed and dated, per applicant.

__ ***Itemized cruise itinerary (Viking Guest Statement)*** showing dates and ports of call in each traveler's name.

__ **Payment:** a check or money order payable to **"GVS"** in US Dollars, drawn on a US bank.

Complete and return this entire form with the requested materials using secure, trackable delivery.
Important: Do not send your passport/materials more than 3 months prior to your trip date.

Visa processing generally takes up to 4 weeks. If you need your E-Visas returned **within 21 days**: add $75 per person for rush service, **within 10 days**: add $110 per person for express service. These requirements are for U.S and Canadian passport holders. ***Consular fees, processing times and forms are subject to change without notice**. For terms and conditions, current requirements, and fees please check at ***www.genvisa.com/viking***

YOUR CONTACT INFORMATION

Last Name: _____ **First Name:** _____

Last Name: _____ **First Name:** _____

Physical address: _____ Apt/Ste#: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Your E-mail address (**Important**): _____

Date You Depart the US: _____ **Date You enter New Zealand:** _____

Date You enter Indonesia _____ **First Port of Arrival** _____

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 see the Passport Insurance page for details (included in the visa kit) and choose one of the boxes below.

☐ **Yes**, I have added an additional $29.99 per person for the Lifetime Expedited Passport Replacement insurance.

☐ **No**, I decline the Lifetime Expedited Passport Replacement insurance.

Send materials to:

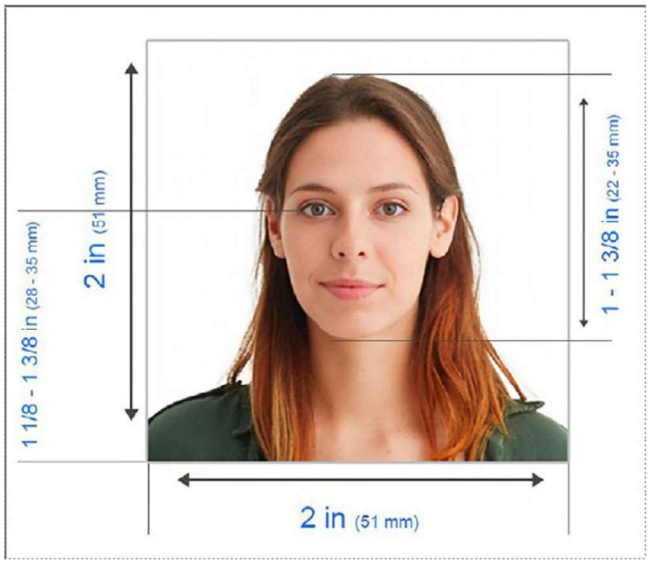
GENERATIONS VISA SERVICE
5335 WISCONSIN AVE N.W. #380
WASHINGTON D.C. 20015-2030
1-800-845-8968

Viking – New Zealand ETA, Indonesia E-Visa

GENERATIONS VISA SERVICE

PROPER FORMAT – PASSPORT PHOTO

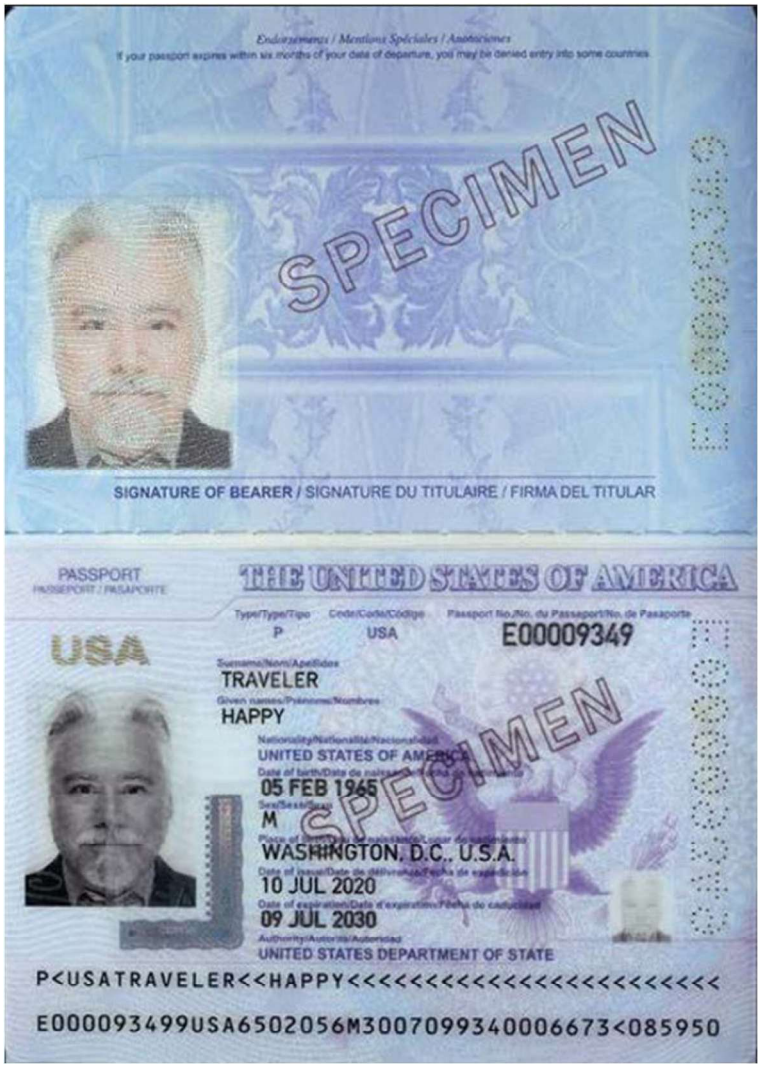
EXAMPLE OF APPROPIATE PASSPORT PHOTO



PROPER FORMAT – PASSPORT COPY

EXAMPLE OF APPROPIATE PASSPORT COPY





Indonesia ETA Request Form

Traveler Details:
Full Name: (As it appears in your passport)
First Name:
Middle Name:
Last Name:
Street Address:
City:
State:
Zip Code:
Date of Birth:
Place of Birth:
Email Address:
Passport Information:
Passport Number:
Passport Issue Date:
Passport Expiration Date:
Travel Information:
Date of Departure from United States:
Date of Arrival in Indonesia:
Mode of Transportation: □ Air ☑ Sea □ Land
Address in Indonesia:
Port of Entry in Indonesia:
Port of Exit in Indonesia:
Purpose of Visit: Tourism

Applicant's Signature: _____

Date: _____

New Zealand Electronic Travel Authority (NZeTA)

Visiting New Zealand

Passport holders of some countries and territories do not have to apply for a visa before they travel to NZ but must hold an NZeTA.
If you plan to visit New Zealand for a short period, you must request an NZeTA before you travel if you:

- travel on a passport from a country on the **list of visa waiver countries** and territories, and
- are visiting for up to 3 months — or, if you are a British citizen, up to 6 months.

Coming to New Zealand for medical help

If you are from a visa waiver country or territory and coming to New Zealand for a medical consultation or treatment, you must apply for a visa
Medical Treatment Visitor Visa

List of visa waiver countries and territories:

Andorra, Argentina, Austria, Bahrain, Belgium, Brazil, Brunei, Bulgaria, Canada, Chile, Croatia, Cyprus, Czech Republic, Denmark, Estonia - citizens only, Finland, France, Germany, Greece, Hong Kong - residents with HKSAR or British National Overseas passports only, Hungary, Iceland, Ireland, Israel, Italy Japan, Korea (South), Kuwait, Latvia - citizens only, Liechtenstein, Lithuania — citizens only, Luxembourg, Macau - only if you have a Macau Special Administrative Region passport, Malaysia, Malta, Mauritius, Mexico, Monaco, Netherlands, Norway, Oman, Poland, Portugal — if you have the right to live permanently in Portugal, Qatar, Romania, San Marino, Saudi Arabia, Seychelles, Singapore, Slovak Republic, Slovenia, Spain, Sweden, Switzerland, Taiwan - if you are a permanent resident, United Arab Emirates, United Kingdom - if you have the right to reside permanently in the United Kingdom, United States of America — including USA nationals, Uruguay, Vatican City

Validity:

NZeTA is valid for multiple entries for up to 2 years.

Processing Time:

1-3 days

NZeTA fees:

NZeTA (New Zealand Electronic Travel Authority) fee:$23.00 NZD (Included in the total)
International Visitor Conservation and Tourism Levy*: $100.00 NZD (Included in the total)
Total: **$123.00 NZD**

GenVisa Service Fee: **$69.00 US (Included in the total)**

**The International Visitor Conservation and Tourism Levy (IVL) is a way for you to contribute directly to the tourism infrastructure you use and to help protect and enhance the natural environment you will enjoy during your stay in New Zealand.*

New Zealand Electronic Travel Authority Declaration

To the best of my knowledge the information I have provided in this form is accurate and I have answered the questions truthfully and correctly.

I understand that it is my responsibility to ensure that the passport details provided in this form match the details on the passport I intend to use when I travel to New Zealand. I have checked these details to confirm they are correct.

I understand that I must meet all other requirements to travel to New Zealand.

I understand that INZ may provide information to other agencies in New Zealand and overseas where such disclosure is required or permitted by the Privacy Act 1993, or otherwise required or permitted by law. I understand my information may be used to improve INZ's services and administration of the Immigration Act 2009.

I authorize INZ to provide information about my eligibility to travel to New Zealand, including about my NZeTA to a carrier, including via an approved online system, in order to facilitate my travel.

Signature _____ Date _____

Full Name as in Passport (please print)

NZeTA Application Form

Please provide us with the following information to complete your online visa application. Each applicant should fill out their questionnaire. After completion, please send it to GenVisa with the rest of the required documentation.

Important: Your Email address will be provided to MBIE for contact purposes. YOU WILL receive two official confirmation emails from the New Zealand Immigration, one to confirm the submission of your request and another to advise you that your NZeTA was ISSUED. In order for GenVisa team to finalize your request please acknowledge to us the RECEIPT of your approval notice via email at info@genvisa.com

PERSONAL INFORMATION:
Surname (as it appears in the passport):
First Name:
Middle Name:
Previous Names:
Gender: Male ☐ Female ☐
Date of Birth (MM/DD/YYYY): __ __ /__ __ / __ __ __ __
Place of Birth (city, state, country):
Nationality at Birth:
CONTACT INFORMATION:
Physical Address:
City, State, Zip code:

Phone Number:
Email Address(**important**):
PASSPORT INFORMATION:
Passport Number:
Place of Issue:
Date of Issue (MM/DD/YYYY): __ __ /__ __ / __ __ __ __
Date of Expiry (MM/DD/YYYY): __ __ /__ __ / __ __ __ __
VISIT INFORMATION:
Type of Visa: NZeTA
Purpose of Visit: Tourism
Is this your first time to visit New Zealand? YES ☐ NO ☐
If no, please specify last visit date and visa number: _____
Type of Port of Arrival: Airport ☐ Boat ☐
Port of Entry:
Port of Exit:

Date of Arrival (MM/DD/YYYY): __ __ /__ __ / __ __ __ __
Duration of Stay (days):
ELIGIBILITY QUESTIONS:
1. Will you be traveling to New Zealand for medical consultation or treatment? Yes ☐ No ☐ If yes, please explain _____ _____
2. Have you ever been deported, removed or excluded from another country (Not New Zealand)? Yes ☐ No ☐ If yes, please explain _____ _____
3. Are you currently prohibited from entering New Zealand following deportation from New Zealand in the past? Yes ☐ No ☐ If yes, please explain _____ _____
4. Have you ever been convicted of any offence (in any country)? Yes ☐ No ☐
If you answered Yes to questions #4, please answer the following questions: 1. Have you ever been convicted of an offence for which you were sentenced to 5 years or more imprisonment? Yes ☐ No ☐ 2. In the last 10 years, have you been convicted of an offence for which you were sentenced to a prison term of 12 months or more? Yes ☐ No ☐

SIGNATURE_____ DATE_____

Full Name as it appears in your Passport (please print)

_____

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.

☐ **Yes**, I have added an additional $29.99 per person for the Lifetime Passport Replacement insurance. **Please add insurance fees to the total payment.**

Name and Signature: _____ Date: _____

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:

- 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 (Pease fill out legibly in block letters)

Traveler #1's full name (**LAST**, First, Middle):
Date of Birth (MM/DD/YYYY):
Gender: Male ☐ Female ☐
Passport Number: P _ _ _ _ _ _ _ _ _
Email Address*:
Phone Number:

Traveler #2's full name (**LAST**, First, Middle):
Date of Birth (MM/DD/YYYY):
Gender: Male ☐ Female ☐
Passport Number: P _ _ _ _ _ _ _ _ _
Email Address*:
Phone Number:

***Email addresses will not be used for solicitation purposes**

Travel Information

Country #1:
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: Viking Cruises
866-984-5464

Country #2 (if applicable):
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: Viking Cruises
866-984-5464

☐ **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.

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.