

**TOURIST VISA
REQUIREMENTS FOR ERITREA**

**Total cost
One person
\$83**

**Total cost
Two people
\$149**

Cost includes service fees, consular fees* and return by *FedEx*
Add \$25 per address for return outside 48 U.S. States.

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

1. Your **signed** passport: having one completely blank "visa" page & **six** months remaining validity.
2. **One** recent passport picture(s) per person (approx 2x2) – **no** home photos / **no** photocopies.
3. **One** completed and **signed** visa application form per person (attached).
4. **Copy of flight itinerary.**
5. Payment: a check or money order payable to: **Generations Visa Service** (U.S. Dollars).

Complete and *return this entire form* with the requested materials – use a traceable form of mail.
Important: Do not send your passport/materials more than 3 months prior to your ERITREA trip date.

If you are departing **within 14 days**: add \$25 per person, **within 7 days**: add \$35 per person for expedited service. If you are departing **within 5 days**: call GenVisa prior to sending your materials. If you are a non-US citizen, call for requirements. ***Consular fees are subject to change without notice!.**

YOUR RETURN ADDRESS – No P.O. Boxes

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

Optional insurance: \$8.00 per passport: in the unlikely event that your passport is lost or damaged in transit. This will cover your full out of pocket and replacement costs up to \$2,000. Please check one of the boxes below.

yes, I have added an additional \$8.00 per person for the optional insurance.

[FedEx signature will be required.]

No, I decline the optional insurance and understand that in the unlikely event my passport is lost or damaged,
Generations Visa Service and FedEx liability is limited to \$100. [No
FedEx signature required upon delivery.]

VKG2

Mail materials to:
GENERATIONS VISA SERVICE
2233 WISCONSIN AVE N.W. #226
WASHINGTON D.C. 20007-4119



EMBASSY OF ERITREA
1708 NEW HAMPSHIIRE AVE NW
WASHINGTON, DC 20009
TEL: (202) 319-1991, FAX: (202) 319-1304

Print
Your
name on
the back
Picture

APPLICATION FOR ENTRY OR TOURSIST VISA

1. Full Name (as in Passport) _____ 1.1-Sex _____

1.2-Former Name (if any) _____

2. Place & date of Birth _____ 3.-Occupation/Profession _____

4. Present Nationality: _____ 4.1-Nationality by birth _____

5. Passport type: _____ 5.1-Passport No. _____

5.2-Place & date of issue _____ 5.3-Valid until _____

6. Marital Status: _____ 6.1- Name of spouse (if Married) _____

7. Permanent address: _____ 7.1- Tel: (H) _____

_____ 7.2- Tel: (W) _____

8. Purpose of entry: Tourism: Official: Diplomat Business:

Employment: Other:

9. Entry desired: Single Multiple 10.-Expected date of arrival _____

10.1- Period of stay _____

11. Address in Eritrea _____ 11.1-Tel. In Eritrea: _____

12. Reference in Eritrea _____ 12.1-Tel In Eritrea: _____

13. Place and date of previous visits to Eritrea _____

I declare that the information given above to be correct and complete to the best of my knowledge.

Place: _____ Date: _____

Signature _____

FOR OFFICIAL USE ONLY

Decision taken _____ Entry/Visa No. _____ Sticker#: _____

Date of Issue: _____ Date of Expiration _____ Receipt: _____

Remarks _____ Name & Signature of Authority: _____

