

The Travel Visa Company

Your Dedicated, Worldwide Travel Visa Agency



REFERRED BY

i.e. Travel Agent / Tour Operator / Cruise Line / Search Engine / Repeat Customer / Friend / Other

You **MUST** return this front page with your application.

RETURN ADDRESS

The Travel Visa Company Ltd.

First Floor Unit 10
Alvaston Business Park
Middlewich Road
Nantwich, Cheshire
CW5 6PF



SUPPORT

If you have any queries or would like additional assistance when completing your application, please contact us and one of our team would be happy to assist.



Telephone: **01270 904 907**



Email: **applications@thetravelvisacompany.co.uk**

Rwanda Tourist eVisa Application Pack

Thank you for requesting an application pack for a Rwanda Tourist eVisa.

Please complete the following three sections and then return the application pack and all supporting documents to The Travel Visa Company Ltd.

1. Checklist of the documents required
2. Service and delivery options
3. Address and payment details

PLEASE NOTE

This service is only available for U.S. passport holders.

A single-entry Rwanda Tourist eVisa is valid for 30 days from the date of issuance and permits a single entry of up to 30 days.

A multiple-entry eVisa is valid for 90 days from the date of issuance and permits multiple entries of up to 30 days at a time.

1. Checklist of the documents required

✓ Please tick to confirm you have provided the following:

- ☐ **RWANDA TOURIST EVISA APPLICATION FORM** – Please find attached. It is important to carefully read through all the questions and fully complete all forms in **BLOCK CAPITALS** with a **BLACK PEN**. All application forms **MUST** be printed single-sided. Application forms printed double-sided **WILL NOT** be accepted.
- ☐ **COPY OF PASSPORT** – Please include a copy of the photograph/information page of your passport. Your passport must be valid for at least 6 months from your date of entry into Rwanda and have at least 2 blank pages.

 Failure to provide us with these documents will result in delays with your application.

2. Service and delivery options

✓ Please tick to confirm which service and delivery type you are requesting:

SINGLE ENTRY eVISA

Valid for up to 30 days and permits a single entry of up to 30 days.

☐

Service Type	Processing Time	Embassy Fee	Service Fee	VAT	Total
Standard	25 days*	£40.00	£41.62	£8.33	£89.95

MULTIPLE ENTRY eVISA

Valid for 90 days and permits multiple entries of up to 30 days at a time.

☐

Service Type	Processing Time	Embassy Fee	Service Fee	VAT	Total
Standard	25 days*	£55.00	£41.62	£8.33	£104.95

*Working days excluding postal days.

Continued overleaf...

Delivery Type	Price
☐ Email Confirmation	-

DATE OF TRAVEL

..... DD/MM/YYYY

LENGTH OF STAY

..... Days

3. Address and payment details

Name:

Address:

.....

.....

Postcode:

Telephone:

Email:

☐ Credit/Debit Card

Name on card:

.....

Card Number:

.....

Expiry Date: CVC:

☐ Paypal paypal@thetravelvisacompany.co.uk

☐ Cheque

☐ BACS Reference:

EMAIL MARKETING (not required)

☐ I would like to sign up to the TVC mailing list.

We do not share your data with any third parties. To view our privacy policy, visit:

www.thetravelvisacompany.co.uk/privacy

Cheque/BACS payments are to be made payable to "The Travel Visa Company Ltd."

Bank Details: 68032405 / 08-92-50

TERMS & CONDITIONS (required)

☐ I have read, fully understood and agree to the Terms & Conditions and Client Declaration.

www.thetravelvisacompany.co.uk/terms

www.thetravelvisacompany.co.uk/declaration

Signed: Date:

Please contact us if you would like to receive a printed copy of these documents.

Personal Information

Nationality:	
Occupation:	
Surname:	As shown in passport
Given name(s):	As shown in passport
Date of birth:	DD/MM/YYYY
Gender:	☐ Male ☐ Female
Place of birth:	
Town/City:	
State/Province:	
Country:	
Marital status:	☐ Married ☐ Divorced ☐ Single ☐ Widowed ☐ Other
If married	Spouse's nationality:
Father's name:	
Mother's name:	
You must still provide details if any of your parents are deceased.	

Passport Details

Passport type:	☐ Regular ☐ Official ☐ Diplomatic
Passport number:	
Issue date:	DD/MM/YYYY
Expiry date:	DD/MM/YYYY

Applicant Contact Details

Phone number:	
Email address:	
Current address:	

Travel Details

Briefly explain your purpose of travel:	
Port of arrival:	
Date of arrival:	DD/MM/YYYY
Date of departure:	DD/MM/YYYY
Total duration of stay:	Days
Have you previously travelled to Rwanda? ☐ Yes ☐ No	
If yes	Previous date of arrival: DD/MM/YYYY
	Previous length of stay: Days
Hotel/accommodation in Rwanda:	
Hotel/accommodation address:	
Hotel/accommodation telephone:	
Hotel/accommodation email address:	

Please tick to confirm your application details:

- ☐ I, the applicant, hereby certify that I have read, or have had read to me, all the questions and statements on this application and understand all the questions and statements on this application. The answers and information furnished in this application are true and correct to the best of my knowledge and belief.

Print name (BLOCK CAPITALS):

Date: DD/MM/YYYY