

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.

Unit 2A, The Courtyard
Regents Park, London Road
Nantwich, Cheshire
CW5 6LW



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**

Uganda East Africa Visa Application Pack

Thank you for requesting an application pack for a Uganda East Africa Visa.

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

An East Africa Visa permits travel into Uganda, Kenya and Rwanda for tourist purposes only.

A Uganda East Africa Visa is valid for 90 days from the date of issue and permits multiple entries into the three designated countries. The visa will expire upon exit from the East African Region.

The issuing country should be your first entry point. If you are not entering the East African Region through Uganda, you **should not** use this application form. Please contact The Travel Visa Company to discuss your options.

1. Checklist of the documents required

- ✓ Please tick to confirm you have provided the following:
- ☐ **UGANDA EAST AFRICA VISA 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.
 - ☐ **PASSPORT COPY** – Please include a copy your passport's photograph/information page. Your passport must be valid for at least 6 months from your date of entry into Uganda.
 - ☐ **PHOTOGRAPH** – The photograph must passport size, taken within the last 6 months, against a light background, printed on photographic paper, be full face and non-smiling [without sunglasses, a hat/cap or other head covering, unless the applicant wears such items because of their religious belief or ethnic background].
 - ☐ **TRAVEL TICKET** - Please provide a copy of your flight/cruise confirmation which demonstrates that you have a return/onward ticket booked.

- ☐ **TRAVEL ITINERARY** - Please provide a comprehensive itinerary which details your plan whilst in the East African Region and shows your movements between the three countries.
- ☐ **YELLOW FEVER CERTIFICATE** - Please include a copy of your up-to-date yellow fever vaccination certificate.

! 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:

UGANDA EAST AFRICA VISA

Valid for 90 days from the date of issue.

	Service Type	Processing Time	Embassy Fee	Service Fee	VAT	Total
<input type="checkbox"/>	Standard	15 days*	£90.00	£45.79	£9.16	£144.95

*Working days excluding postal days.

	Delivery Type	Price
<input type="checkbox"/>	Email Confirmation	-
<input type="checkbox"/>	Provide Pre-Paid Envelope*	-
<input type="checkbox"/>	Posted Confirmation	£5.00
<input type="checkbox"/>	Collect from TVC Office	-

DATE OF TRAVEL

DD MM YYYY

LENGTH OF STAY

..... Days

*If you provide a pre-paid envelope please ensure it has your return address and the correct postage amount.

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:

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

Bank Details: 68032405 / 08-92-50

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**TERMS & CONDITIONS** (required)☐ I have read, fully understood and agree to the Terms & Conditions and Client Declaration.www.thetravelvisacompany.co.uk/termswww.thetravelvisacompany.co.uk/declaration

Signed: Date:

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

Personal Information

Surname: As shown in passport

Given name(s): As shown in passport

Date of birth: DD/MM/YYYY

Gender: ☐ Male ☐ Female

Marital status: ☐ Married ☐ Divorced ☐ Single ☐ Widowed
☐ Other

If married Spouse's full name:

Nationality:

Do you have or have you ever held any other nationalities?
☐ Yes ☐ No

If yes Other nationality:

Place of birth:

Town/City:

State/Province:

Country:

Country of residence:

Immigration status in country of residence:

☐ Citizen

☐ Student

☐ Tourist

☐ Work

☐ Other

Passport Details

Passport type: ☐ Regular ☐ Official ☐ Diplomatic

Passport number:

Issuing country:

Issuing authority:

Issue date: DD/MM/YYYY

Expiry date: DD/MM/YYYY

Applicant Contact Details

Phone number:

Email address:

Current address:

Street:

Town/City:

State/Province:

Postcode:

Country:

Travel Details

Purpose of travel:

☐ Tourism

☐ Transit

☐ Visiting a Ugandan relative

☐ Visiting a non-Ugandan relative who resides in Uganda

Proposed date of travel: DD/MM/YYYY

Proposed date of departure: DD/MM/YYYY

Total length of stay: Days

Hotel/host name:

Hotel/host telephone number:

Travel Details

Address in Uganda:

Street:

Town/City:

State/Province:

Postcode:

Please list the last 5 countries you have visited:

Port of entry:

Have you previously been denied a visa?

☐ Yes ☐ No

Have you previously been deported?

☐ Yes ☐ No

Have you previously been convicted for any crime, in any country?

☐ Yes ☐ No

Are there currently any criminal proceedings against you?

☐ Yes ☐ No

Are you suffering from any mental illness?

☐ Yes ☐ No

☐ I confirm that all information provided in this form is accurate and valid.

If you have answered 'yes' to any of the above questions, please provide further detail below:

Additional writing space if required: