

TOURIST VISA REQUIREMENTS:

INDONESIA E-VOA

Government Fee: - \$ 36
Discounted GenVisa fee: - \$ 79
Total Cost for one person: - \$115

Government Fee: - \$ 72
Discounted GenVisa fee: - \$158
Total Cost for two people: - \$230

Cost includes service fees, consular/government fees*, and return by email.

Please complete and return this entire form with the requested materials to GenVisa by traceable mail to the address below.

- ___ High-resolution COLOR copy of the passport pages (data and signature pages 2 and 3) on a single sheet of paper in actual size. Your physical passport should have 3 (three) blank "visa" pages & six months remaining validity beyond your last day of travel. If you need help securing or renewing your passport, please contact GenVisa at 800-845-8968 for requirements and fees.
- ___ One (1) recent high resolution, professional, passport-type picture per person. **No cell phone photos!**
- ___ Indonesia E-VOA Form signed and dated, one per applicant (enclosed in the visa kit).
- ___ Itemized cruise itinerary (Guest Statement), showing travel dates and ports of call in each traveler's name.
- ___ **Payment: a check or money order payable to GenVisa in US Dollars, drawn on a US bank.**

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

Please allow up to 21 days for processing and receipt of your Indonesia E-VOA. If you need your E-VOA **within 10 business days: add \$55 per person** (expedited GenVisa service fee).

Government fees are subject to change without notice. **For terms and conditions, current requirements, updated forms, and fees please check at www.genvisa.com/viking**

YOUR CONTACT INFORMATION

Last Name: _____ First Name: _____

Last Name: _____ First Name: _____

Return to: ☐ Home or ☐ Business (recommended for security reasons) Name & c/o: _____

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

City: _____ State: _____ Zip Code: _____

Date you need your E-VOAs: _____ Your E-mail address (Important): _____

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

Date You Depart the US: _____

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 – Ocean Cruise (Indonesia E-VOA)



Indonesia E-VOA 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: _____



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.

Please choose one of the boxes below.

- ☐ **No**, I decline the Lifetime Passport Replacement insurance.
- ☐ **Yes**, I have added an additional \$29.99 per person for the Lifetime Passport Replacement insurance. **Please include insurance fees in the total payment for visa processing.**

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 Ocean 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 Ocean 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.