

TOURIST VISA REQUIREMENTS:

Tema to Lisbon on board Silver Wind - Ghana Single Entry Label Visa

Government Fee:	- \$ 67	Government Fees:	- \$134
Discounted GenVisa fee:	- \$ 54	Discounted GenVisa fees:	- \$108
Return Shipping via FedEx:	- \$ 48	Return Shipping via FedEx:	- \$ 48
WG application transcribing fee:	- \$ 49	WG application transcribing fees:	- \$ 98
Total Cost for one person :	\$218	Total Cost for two people :	\$388

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

- o **Your actual signed passport:** having two blank "visa" pages & six months remaining validity beyond the travel date. For help renewing your passport contact GenVisa at (800) 845-8968 for requirements and fees.
- o **Two (2) High Resolution Passport Photos:** 2"x 2", taken within 6 months on white background without any shadows – front view, no smiling, and no glasses. **No homemade photos, please!**
- o **One completed and signed visa application form** per person (attached). Due to the complexity of the online Ghana application system, applicants are required to use GenVisa White Glove Service.
- o **Flight, cruise itinerary and hotel confirmation (if applicable)**, showing dates of travel, arrival points for each passenger.
- o A photocopy of each applicant's **International Certificate of Vaccination for Yellow Fever.**
- o **Payment:** a check or money order payable to GenVisa in US Dollars and 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 departure date.

Visa processing generally takes up to 30 business days. If you need your Visa returned **within 15 days: add \$155 per person** for expedited service. ***Consular fees, processing times and forms are subject to change without notice.** For current requirements, terms and conditions, updated forms and fees please check at: www.genvisa.com/silverseacruises

YOUR CONTACT INFORMATION

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 Visa: _____ Date you depart the U.S.: _____ Date you enter Ghana: _____

Your E-mail address (Important): _____ (please write in block letters)

Optional insurance: \$12 per passport: in the unlikely event that your passport is lost or damaged in transit, this will cover your full out of pocket direct visa(s) and passport replacement costs up to \$2,000. **Please check one of the boxes below:**

☐ **Yes**, I have added an additional **\$12 per person** for the optional insurance. [FedEx signature required upon delivery]

☐ **No**, I decline the optional insurance and understand that in the unlikely event my passport is lost or damaged;

Generations Visa Service liability is limited to \$100 [No signature required upon delivery].

Mail materials to:

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

Silversea – Ghana Visa



Ghana Visa Application Questionnaire

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

- Your actual SIGNED passport, having Four (2) completely blank "visa" pages & six months remaining validity from the date when your cruise ends.
 - One fully completed and signed visa application form per person per country (posted below)
- Due to the complexity of the on line Ghana visa application system, all applicants are required to use GenVisa White Glove Service to have a GenVisa associate complete the on-line application.
- Two (2) recent high-resolution passport style 2"x 2" color photos per person on glossy photo paper, with a white background. DO NOT STAPLE - attach with a paper clip! No cell phone photos!
 - A photocopy of the applicant's International Certificate of Vaccination for Yellow Fever.
 - A copy of the applicant's flight and cruise itinerary showing entry/exit into Ghana.
 - Payment: a check or money order payable to GenVisa in US Dollars and drawn on a US bank.

VISA TYPE REQUESTED:

- ☐ Single Entry, Tourist
☐ Multiple Entry, Tourist

PERSONAL INFORMATION:

Last Name: _____

First Name: _____

Middle Name: _____ Previous Legal Name(s)/Maiden Name(s): _____

Gender: ☐ Male ☐ Female

Date of Birth: ____ / ____ / ____
Day Month Year

Place of Birth: City: _____ State: _____

Country of Birth: ☐ USA ☐ Other: _____

Your Occupation: _____

Father's Full Name: _____

Mother's Full Name: _____

Spouse's Full Name, if married: _____

Your Citizenship: ☐ USA ☐ Other: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Telephone: _____ Email: _____

Passport Number:_____

Issuing Authority: ☐ US Department of State ☐ Other:_____

Date of Issue:_____/_____/_____
Day Month Year

Date of Expiry:_____/_____/_____
Day Month Year

TRAVEL INFORMATION:

Purpose of Visit: ☐ Tourist

Date of Entry:_____/_____/_____
Day Month Year

Date of Departure:_____/_____/_____
Day Month Year

List the details of your stay in Ghana (hotel, or private host):

Contact Person in Ghana:_____

Hotel Name/Guest House in Ghana:_____

Street Address:_____

City/Town:_____ Region: _____

Telephone:_____

Email:_____

Have you previously visited Ghana? ☐ No ☐ Yes:_____ to _____
Date of Entry Date of Exit

If yes, provide details of visit:

Have you ever been denied entry to Ghana? ☐ Yes ☐ No

Have you ever been denied entry to another country? ☐ Yes ☐ No

Have you ever been convicted of a felony? ☐ Yes ☐ No

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

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

Traveler #2's Full name (LAST, First, Middle):
Date of Birth (MM/DD/YYYY): / /
Passport Number: P _____
Date of Exp. (MM/DD/YYYY): / /
Gender: Male ____ Female ____
Email Address*:
Phone Number:

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

Travel Information

Country #1: UGANDA
Approx. Date of Entry (MM/DD/YYYY): / /
Approx. Date of Exit (MM/DD/YYYY): / /
Name and Address of the first hotel:
Contact in Country, if known (phone or email):

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:
Contact in Country, if known (phone or email):

- ☐ **Yes**, please enroll me in Smart Traveler Program. I have added an additional **\$15.00 per person** for this service.
- ☐ **No**, I decline the optional Smart Traveler Program enrollment 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.