

TOURIST VISA REQUIREMENTS

India E-Visa (M/E, 1 Year validity) and Sri Lanka ETA

Government Fees: - \$100
Discounted GenVisa fees: - \$158
Total Cost for one person: - \$ 258

Government Fees: - \$200
Discounted GenVisa fees: - \$316
Total Cost for two people: - \$516

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

Complete and return this entire form via email as a PDF file with the following required materials as attachments in the specified format to celebrity@genvisa.com

For mail submissions please use the address below.

- **A clear High-Resolution COLOR copy of the data page of your passport** (pp. 2-3) in actual size, taken on a professional copy machine. Your actual passport must be signed. **No cell phone photos, please!**
Size requirements for email submissions: Minimum 50 KB, Maximum 300 KB, in PDF format
- **One (1) High-Resolution Passport Photo**, 2"x 2", taken within 6 months on a white background without any shadows – front view, no smiling, and no glasses. **No homemade cell phone photos, please!**
Size requirements for email submissions: Minimum 50 KB, Maximum 1 MB in JPEG format.
- **India and Sri Lanka Personal Information Form** is enclosed in the visa kit. Make sure to provide accurate and detailed information on all the forms to avoid processing delays.
- **Cruise and flight itinerary**, showing dates of travel, arrival, and departure points for each passenger.
- **Payment:** a check or money order payable to GenVisa in US Dollars and drawn on a US bank or for credit card payment please fill out enclosed CC Authorization Form (**3 % credit card transaction fee will apply**)

Complete and return this entire form via email as a PDF file with the following required materials as attachments in the specified format. For mail submissions, use traceable delivery.

Important: Do not send your materials more than 3 months before your departure date.

Visa processing generally takes up to 4 weeks. If you need your E-Visas returned **within 15 days**: add \$90 per person for expedited service, **within 7 days**: add \$150 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/rcg

YOUR CONTACT INFORMATION

Last Name: _____ First Name: _____

Last Name: _____ First Name: _____

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

City: _____ State: _____ Zip Code: _____

Date you enter India _____ Port of arrival in India _____

Date you enter Sri Lanka _____ Port of arrival in New Sri Lanka _____

Date you need your E-Visas: _____ Date you depart the U.S.: _____

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

Mail materials to:

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

Celebrity – India E-Visa, Sri Lanka ETA



CODE _____



India and Sri Lanka Personal Information Form

Please answer **legibly in full detail** all the questions in the following questionnaire. Return to GenVisa with the rest of the required information listed on the Tourist Visa Requirements form.

Mistakes will delay the processing and may result in rejections.

	QUESTIONS	ANSWERS
APPLICANTS INFORMATION		
1.	Surname, as in passport	
2.	Given Names (first, middle)	
3.	Other names used (maiden, etc.)	
4.	Place of Birth (TOWN, State, Country)	
5.	Driver's License Number	
6.	Religion	
7.	Visible Identification Marks (moles, scars, tattoos on your face or arms)	
8.	Education (List your highest education)	
9.	Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
10.	Spouse's Full Name as in passport	
11.	Spouse's Nationality	
12.	Spouse's Previous Nationality	
13.	Spouse's Place of Birth (TOWN, State, Country)	

PASSPORT DETAILS

14.	Passport number	
15.	Place of Issue	
16.	Date of issue (dd/mm/yyyy)	
17.	Date of expiry (dd/mm/yyyy)	
18.	Current Nationality	

APPLICANT'S ADDRESS DETAILS

19.	House Number and Street (NO PO BOX)	
20.	City and State	
21.	Zip Code	
22.	Home Phone Number (required)	
23.	Mobile Phone Number (required)	
24.	Email Address (please print)	

FAMILY DETAILS

25.	Father's Full Name	
26.	Father's Nationality	
27.	Father's Place of Birth (City, State, Country)	
28.	Mother's Full Name	
29.	Mother's maiden name, if known	
30.	Mother's Nationality	
31.	Mother's Place of Birth	
32.	Were your Grandfather/Grandmother Pakistan Nationals or Belong to Pakistan Held Area?	

PROFESSION/OCCUPATION DETAILS OF APPLICANT

33.	Present Occupation (if retired, say retired)	
34.	Employer/Business Name	
35.	Designation/Position	
36.	Employer's Full Street Address	_____ _____
37.	Employer's Phone Number	
38.	Past Occupation	
39.	Military Service (if yes, please list organization, designation, rank and station)	_____ _____

VISIT DETAILS

40.	Category of Visa	Tourist E-Visa
41.	Places to be visited in India	
42.	Date of arrival in India (dd/mm/yyyy)	
43.	Port of Arrival in India (Sea or Airport)	
44.	Date of departure from India	
45.	Port of Exit from India (Sea or Airport)	

PREVIOUS VISA DETAILS

46.	Have you ever visited India? If yes, provide date of issue, type of visa, and place of issue (Include a copy of the previous visa with your application). The address of stay during the last stay:	_____ _____ _____
	Last Indian Visa No (if applicable):	

47.	Has permission to visit or to extend stay in India previously have been refused?	
48.	Have you visited “South Asian Association for Regional Cooperation” (SAARC- Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan, Sri Lanka) countries in past 3 year? If yes, please indicate when and list details.	
49.	Countries visited in past 10 years (list just Names of the countries you have visited In last 10 years)	<div></div> <div></div> <div></div> <div></div> <div></div> <div></div>
50.	Reference Name in India, including the Address and the phone number (Seaport Authorities for Ocean Cruise passengers)	
51.	Reference Name in United States (Name, Complete physical address and phone Number of a RELATIVE or FRIEND in your Home Country) MANDATORY!	

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: _____



CREDIT CARD AUTHORIZATION FORM

Card issuer : _____

Credit Card Num: _____

Expiration Date: _____

Visa, MasterCard, Discover **Security Code**: (3 digits in the signature field on back of card): _____

Amex **Security Code**: (four-digit code on front of card, right side): _____

Card Holder: _____

Billing Address: _____

City, State, Zip: _____

Telephones: Day: _____ Eve: _____

This form certifies that I am the above-referenced cardholder and that I authorize
Generations Visa Service to charge my credit card for the following payments

(3 % credit card transaction fee twill be added to the total amount):

NONREFUNDABLE visa processing fees in the amount of \$_____ **US Dollars.**

By signing below, I understand and acknowledge the charges in the amount listed above.

I acknowledge payment in full is to be made when billed or in extended payment in accordance with the standard policy of the company issuing the credit card. Once the application is submitted for processing, I waive my right to dispute these charges.

Under the laws of the state of _____, I certify the foregoing is true and correct.

Card Holder Signature: _____

Printed Name: _____

Date: _____

5335 Wisconsin Ave N.W. # 380, Washington, DC 20015, USA

Phone: (800) 845-8968 | (202) 337-7080 Fax: (202) 337-3447