

Ph. 1-613-231-7054
Ph. 1-866-378-1229
fax 1-613-231-7886
www.VisaServicesCanada.ca

VISA SERVICES CANADA®

Suite 900
275 Slater Street
Ottawa, ON, K1P 5H9

*** ON-SCREEN FILLABLE FORM ***

FULL LEGAL NAME OF APPLICANTS: as in the passport

Travel Agency stamp/card - Optional-

A. _____
B. _____
C. _____
D. _____

FULL MAILING ADDRESS: for the return your passport by secure shipment (or attach a business card)

Street: _____ Apartment #: _____
City: _____ Prov: _____ Postal Code: _____
Home Phone: _____ Office phone: _____ ext: _____
Cell & Fax: _____ email: _____

VISA COUNTRIES: list the countries for which you need visas

Countries in order of arrival	Visa type business / tourism / etc.	Entry 1 / 2 / Multi	Service level regular / fast	Date of Entry & Exit of the visa country
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

SHIPPING OPTIONS

- Personal pick-up in Ottawa
Canadian shipping \$30.
Cdn 10 a.m. shipping \$40.
Foreign Shipping (cost+)

COSTS: Visa cost per passport, plus the service charge per passport, plus the single shipment cost, minus any discounts, gives the estimated total cost of the complete service.

Call to arrange payment by money order or certified cheque.

Visa price + service + shipping = total cost

(Please leave this area blank)

Terms: By using *Visa Services Canada* you are authorizing the company to handle your personal information and your passport, and to hand over such passports and information to a foreign diplomatic mission in Canada or abroad for the purpose of acquiring a visa. By using the services of VSC you are accepting in whole the following terms, conditions, and limitations: VSC cannot and does not guarantee a visa will be issued by a diplomatic office, as this is the sole prerogative of the foreign government. VSC is not responsible for the safety or security of your passport once the passport has entered the diplomatic grounds or passed into the control of the shipper. VSC is not liable for any stolen or lost passport, and has no liability for late shipping delivery of passports and visas. I understand this liability statement, (signed),

Signature: _____  Date: _____

PAYMENT OPTIONS Money Order Certified Cheque Visa Card MasterCard

I (name on credit card - must be a visa applicant) _____
authorize *Visa Services Canada* to make a charge on my credit card solely for the payment of embassy fees, handling and processing fees changed by VSC, and courier fees as applicable. Credit card use will incur a 3% charge.

AUTH #

Credit card number: _____

Expiration date (mm/yyyy): _____ / _____

Signature: _____  Date: _____

VISA SERVICES CANADA

WWW.VISASERVICESCANADA.CA

VISA APPLICATION FEES FOR GRENADA

*** Visa fees and times are subject to change by embassies without notice ***

BUSINESS VISA - TOURIST VISA \$77.50

Processing: 15 working days

SERVICE CHARGE (per person per visa) \$75.
(Service charge for accompanying children under 16 years of age is \$50. total)

COURIER in Canada \$30. (at cost to USA)

TOTAL COST TO YOU (Visa(s) + Service(s) + Courier) \$ _____

SPECIFIC VISA REQUIREMENTS FOR GRENADA

PASSPORT, valid for 6 months.

Passport Photos 2

Return Air Ticket x (or)

VISA APPLICATION Form 1

Onward Air Ticket x

BUSINESS VISA

- passport, valid for 6 months at least,
- one (1) fully completed and signed visa application form,
- two (2) recent passport-style photographs,
- air tickets back to Canada or on to another destination, or an itinerary from your travel agent.

TOURIST VISA

- passport, valid for 6 months at least,
- one (1) fully completed and signed visa application form,
- two (2) recent passport-style photographs,
- air tickets back to Canada or on to another destination, or an itinerary from your travel agent.



GRENADA VISA APPLICATION FORM

Surname: Address in Grenada:

First & Middle Names:
 Maiden Name: Telephone No.

Date of Birth: D...../M...../Y..... Purpose of Visit:

Place of Birth: Intended Date of Arrival:

Nationality:

Marital Status:

Passport No.

Date of Issue:

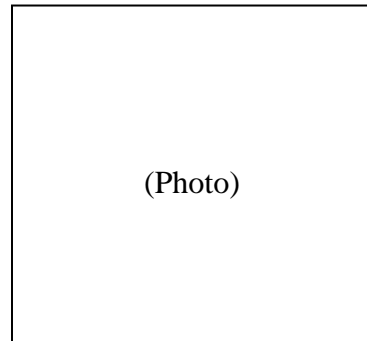
Date of Expiry:

Employer's Name:

Home Address:

Occupation:

Telephone:



Signature of Applicant:

OFFICIAL USE ONLY

Date of Application:

Receipt No.

Approved: Not Approved:

Visa No.

Applicant was denied for the following reason:

.....

.....

Issued By:

Date Issued:

.....
Immigration and Passport Officer

VISA SERVICES CANADA

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613-231-7054

I, _____, authorize *Visa Services Canada* to act on my behalf in acquiring a visa for my passport. *Visa Services Canada* is authorized to drop-off and pick-up my passport and any other personal documents from the embassy, high commission, consulate, diplomatic mission of the country of _____ while aiding me in acquiring a visa. *Visa Services Canada* is also authorized to receive information about my application from the visa office while acting on my behalf.

Signed on this _____ day of the month of _____ in the year _____,
in the city of _____ in the province of _____, in Canada.

Signature _____

SIGN HERE

Witness _____

WITNESS

OFFICE COPY

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SIGN HERE

Witness _____

WITNESS

EMBASSY COPY