

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 ST.
OTTAWA, ON
K1P 5H9

Fillable Form:

FULL LEGAL NAME OF APPLICANTS: (as in your passport)

1. _____
2. _____
3. _____
4. _____

Travel agency stamp & address

FULL MAILING ADDRESS: (so we can return your passport by courier)

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

VISA COUNTRIES: (list the countries for which you need a visa)

Country	Visa type (business / tourism / etc.)	Entry (1 / 2 / 3+)	Service level (regular / now)	Price (see next page)
1. _____	_____	_____	_____	\$ _____
2. _____	_____	_____	_____	\$ _____
3. _____	_____	_____	_____	\$ _____
4. _____	_____	_____	_____	\$ _____

COURIER OPTIONS

- Personal pick-up in Ottawa
Next day courier \$30.
Courier to USA \$40.

COSTS: Add the visa cost per passport listed on page two, plus the service charge per passport on page two, plus the single courier cost at left, to calculate the estimated total cost of the complete service.

Visa price + service + courier = total cost

Terms: By using the services of *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 the USA for the purpose of acquiring a visa. By using the services of VSC you are accepting in whole the following terms and 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 courier. VSC is not liable for any stolen or lost passport, and has no liability for late delivery of passports and visas. I understand this liability statement, (signed),

Signature: _____ Date: _____

PAYMENT

Visa Card

MasterCard

I (print full name as on credit card) _____
authorize *Visa Services Canada* to make a charge on my credit card solely for the payment of embassy fees, handling and processing fees charged by VSC, and courier fees as applicable. Changes in embassy fees may necessitate higher billing.

Credit card number: _____
Expiration date (mm/yyyy): _____ / _____

Signature: _____ Date: _____

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VISA APPLICATION FEES FOR SAINT KITTS & NEVIS

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

BUSINESS VISA - TOURIST VISA

Regular: 4 working days US\$50

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

OVERNIGHT COURIER in Canada \$30. (\$40. to USA)

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

SPECIFIC VISA REQUIREMENTS FOR SAINT KITTS & NEVIS

PASSPORT, valid for 6 months.

Passport Photo(s) 2

Return Air Ticket x (or)

Business Letter x

VISA APPLICATION Form(s) 1

Onward Air Ticket x

Bank Statement(s) x

BUSINESS VISA

- passport, valid for 6 months at least,
- one (1) fully completed and signed visa application form,
- two (2) recent passport-style colour photographs,
- bank statements for past 3 months,
- a letter from your company, stating your job and the purpose of your visit,
- a onward or return air ticket,
- proof of sufficient funds to cover all expenses during your stay.

TOURIST VISA

- passport, valid for 6 months at least,
- one (1) fully completed and signed visa application form,
- two (2) recent passport-style colour photographs,
- bank statements for past 3 months,
- a letter from your company, stating your employment,
- a onward or return air ticket,
- proof of sufficient funds to cover all expenses during your stay.



EMBASSY OF ST. KITTS AND NEVIS

VISA APPLICATION

Information sheet

1. FULL NAME: _____
2. FORMER NAME: (Where different from above) _____
3. DATE OF BIRTH: _____
4. PLACE OF BIRTH: _____
5. NAMES, DATES AND PLACE OF BIRTH OF MINOR CHILDREN ACCOMPANYING YOU:

6. CURRENT ADDRESS: _____
7. TELEPHONE NUMBER: Business () _____ Residence () _____
8. MARITAL STATUS: Married _____ Single _____ Divorced _____ Widowed _____
9. CITEZENSHIP: Present _____ Former _____
10. TYPE OF PASSPORT: _____
11. PASSPORT NUMBER: _____
12. DATE ISSUE: _____
13. EXPIRATION DATE: _____
14. OCCUPATION: _____
15. PURPOSE OF TRAVEL: (a) Pleasure _____ (b) Business _____

16. LENGTH OF STAY: _____
17. DATE OF TRAVEL: _____ 18. CARRIER: _____
19. ALIEN REGISTRATION NO.: (if applicable) _____
20. ACCOMMODATION: (a) Hotel: _____
(b) Private Home: _____
Name and Address of Host/Hostess

I declare the above to be a full and true statement.

Signed: _____
Applicant

Date: ____/____/____
Day Month Year

PLEASE DO NOT WRITE BELOW THIS LINE
FOR OFFICE USE ONLY

Visa Issued on: _____

Date of Departure: _____

Issuing Officer: _____

Carried Flight No.: _____

Fee Paid: _____

Date: _____



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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 _____

Witness _____

OFFICE COPY

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in the city of _____ in the province of _____, in Canada.

Signature _____

Witness _____

EMBASSY COPY