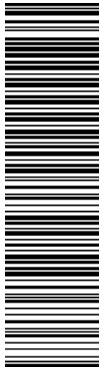


Mail documents to: VisaHQ.ca Inc.  
1701 Rhode Island Ave NW  
Washington, DC 20036  
Tel: 1-202-661-8111



## Central African Republic Tourist visa Application for citizens of Canada living in Alberta



### Please enter your contact information

Name:

Email:

Tel:

Mobile:

The latest date you need your passport returned in time for your travel:

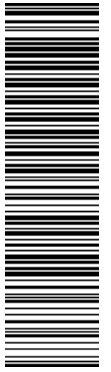
Please make sure that application forms are **not printed on double-sided paper**.



### Central African Republic tourist visa checklist

- ☐ **Filled out and signed Central African Republic tourist visa application form.** The form is enclosed.
- ☐ **Original Passport.** Passport must have at least 6 months remaining validity and have at least 1 visa page.
- ☐ **2 Photographs.** Standard passport photographs 2x2 inches on a white background.
- ☐ **Payment.** Credit Card Authorization form, Certified Check, or Money Order payable to **VisaHQ.ca**.
- ☐ **Return mailer.** Prepaid self-addressed return label or payment for FedEx.
- ☐ **Itinerary.** Copy of round trip tickets or itinerary.
- ☐ **Yellow Fever Vaccination.** A copy of the International Certificate of Vaccination (ICV) for yellow fever. To learn more about the yellow fever vaccination or to locate a vaccination clinic, please visit Health Canada's yellow fever resource centre.
- ☐ **Hotel Reservations.** Copy of confirmed hotel reservations.

Mail documents to: VisaHQ.ca Inc.  
1701 Rhode Island Ave NW  
Washington, DC 20036  
Tel: 1-202-661-8111



If you wish to prepay return shipping, please add the shipping fee to the total and provide return address:

☐ FedEx International Priority - From \$60

☐ Prepaid self addressed mailer - \$0

**Name:**

**Company:**

**Address:**

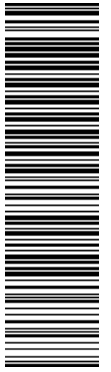
**City:**

**State:**

**Postal  
code:**

\* Actual prices may vary based on location per FedEx.com.

Mail documents to: VisaHQ.ca Inc.  
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Washington, DC 20036  
  
Tel: 1-202-661-8111

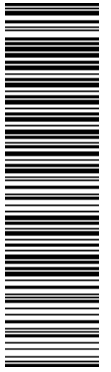


## Central African Republic Tourist visa Application

	Type of visa	Validity	Processing time	Embassy fee	Service fee	HST	Total
	Single Entry	up to 90 days	3 Business Days	\$255.00	\$209.00	\$10.45	\$474.45

This order is subject to Terms of Service, posted on VisaHQ website.  
All fees and requirements may change without notice.

Mail documents to: VisaHQ.ca Inc.  
1701 Rhode Island Ave NW  
Washington, DC 20036  
Tel: 1-202-661-8111



## Credit card authorization form

**By signing this form i accept VisaHQ.ca Terms of Service and authorize to charge my credit card for the amount of \$**

Name on the Credit Card:

Credit card number: - - -

Exp. date: / CVC:

Credit Card Billing Address:

Signature:

Comments:

**Thank you!**  
**We accept all major credit cards.**



# DEMANDE POUR UN VISA

MINISTERE DES AFFAIRES

ETRANGERES

AMBASSADE DE LA

REPUBLIQUE CENTRAFRICAINE

A WASHINGTON

à remplir très lisiblement

Nom . . . . .

Family name

Née . . . . .

Maiden name

Prénoms . . . . .

First and middle names

Né le: . . . . . à: . . . . .  
Born on Birthplace

Nationalité d'origine: \_ . . . . . actuelle: \_ . . . . .  
Nationality at birth Present nationality

Situation de famille: \_ . . . . . Enfants: Nombre: \_ . . . . . Ages: \_ . . . . .  
Marital status Children Number Ages

Domicile habituel: \_ . . . . .  
Permanent address

Résidence actuelle: \_ . . . . .  
Present address

Profession: \_ . . . . .  
Occupation

Nom et adresse de l'employeur: \_ . . . . .  
Name and address of employer

Situation militaire: \_ . . . . .  
Military status

Nature du visa sollicité: \_ . . . . . Transit sans arrêt \_ . . . . .  
Type of visa requested Transit without stopover

Transit avec arrêt \_ . . . . . jours Court séjour de \_ . . . . . mois  
Transit with stopover Short stay of

Un an \_ . . . . . Plusieurs voyages \_ . . . . . (renouvellement) \_ . . . . .  
One year Several trips (Renewal)

Permanent \_ . . . . . De retour (prolongation) \_ . . . . .  
Permanent Of return (Extension)

Motif détaillé du voyage: \_ . . . . .  
Reason for the trip

Etes-vous allé en R.C.A.: \_ . . . . .  
Have you already visited R.C.A.

A quelle date: \_ . . . . .  
If so, when

Attaches familiales et référence en R.C.A.: \_ . . . . .  
Relatives and references in R.C.A.

Référence dans le pays de résidence: \_ . . . . .  
Reference in country where you reside

Indication précise du lieu d'entrée en R. C. A.: \_ . . . . .  
Port of entry in R.C.A.

Date prévu pour le voyage: \_ . . . . . Moyen de transport utilisé: \_ . . . . .  
Planned date for your visit Mode of transportation

Adresse prévue en R.C.A.: \_ . . . . .  
Planned address in R.C.A.

Comptez-vous installer un commerce ou une industrie en R.C.A.: \_ . . . . .  
Are you considering/planning the installation of a business or manufacturing activity in R.C.A.

Quel commerce: \_ . . . . . Quelle industrie: \_ . . . . .  
If so, what business What industry

Où comptez-vous vous rendre en sortant de la R.C.A.: \_ . . . . .  
Where do you intend to go when you leave R.C.A.

Vous engagez-vous à n'accepter aucun emploi rémunéré ou au pair durant votre séjour en R.C.A. à ne chercher à vous installer définitivement et à QUITTER LE TERRITOIRE DE LA R.C.A. A L'EXPIRATION DU VISA qui vous sera éventuellement accordé.  
I agree not to accept any remuneration for employment of any kind during my stay in Central African Republic, nor to seek permanent residence and TO LEAVE CENTRAL AFRICAN REPUBLIC TERRITORY AT THE EXPIRATION OF THE VISA which will eventually be granted to me.

Ma signature engage ma responsabilité et m'expose en sus des poursuites prévues par la Loi en cas de FAUSSE DECLARATION, à me voir REFUSER TOUT VISA A L'AVENIR.

Every statement herein contained is signed under my own responsibility. Any FALSE DECLARATION on my part may result in my being refused any future visa for the Central African Republic.

A \_\_\_\_\_, le \_\_\_\_\_

Signature \_\_\_\_\_ M

Photo
Passeport No. _____
Délivré le _____
à _____
par _____
Visa de Retour
No. _____
Délivré le _____
par _____

# Letter of Authorization

Date:

To whom it may concern:

I, \_\_\_\_\_ authorize \_\_\_\_\_ to act on my behalf regarding the processing of my visa. I have given my consent allowing him to submit and collect all applicable documents, as well as permission to discuss my application with the Consulate should it be deemed necessary.

\_\_\_\_\_  
Signature of Applicant