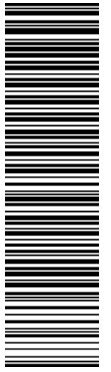


Mail documents to: VisaHQ.ca Inc.  
1701 Rhode Island Ave NW  
Washington, DC 20036  
Tel: 1-202-661-8111



## Laos Tourist visa Application for citizens of Falkland Islands 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**.

Citizens of Falkland Islands can obtain a visa on arrival at Luang Prabang (LPQ), Pakse (PKZ) and Vientiane (VTE) for a stay of up to 30 days.



### Laos tourist visa checklist

☐

**Filled out and signed Laos 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.

☐

**3 Photographs.** Standard passport photographs 2x2 inches on a white background.

☐

**Payment.** Credit Card Authorization form, Certified Check, or Money Order payable to **VisaHQ.ca**.

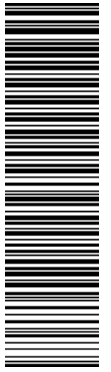
☐

**Return mailer.** Prepaid self-addressed return label or payment for FedEx.

☐

**Itinerary.** Copy of round trip tickets or confirmed itinerary.

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:**

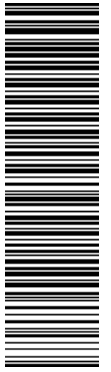
**City:**

**State:**

**Postal  
code:**

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

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Tel: 1-202-661-8111

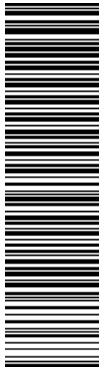


## Laos Tourist visa Application

	Type of visa	Validity	Processing time	Embassy fee	Service fee	HST	Total
	Single Entry	up to 60 days	7-10 business days	\$70.00	\$159.00	\$7.95	\$236.95
	Single Entry	up to 60 days	3 business days	\$98.00	\$169.00	\$8.45	\$275.45

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.**





ສາທາລະນະລັດ ປະຊາທິປະໄຕ ປະຊາຊົນລາວ  
Lao People's Democratic Republic  
ສັນຕິພາບ ເອກະລາດ ປະຊາທິປະໄຕ ເອກະພາບ ວັດທະນາຖາວອນ  
Peace Independence Democracy Unity Prosperity

ສະຖານເອກອັກຄະລັດຖະທູດ  
ແຫ່ງສປປລາວທີ່ວໍຊິງຕັນ ດີ.ຊີ

Embassy of the Lao PDR  
2222 S Street, N.W.  
Washington, DC 20008  
Tel: (202) 667-0076  
Fax: (202) 332-4923

ຄໍາຮ້ອງຂໍວິຊາ  
APPLICATION FOR VISA

ຮູບ  
PHOTOGRAPH  
2" x 2"

ຊື່: .....	ນາມສະກຸນ: .....
FIRST NAME (IN BLOCK LETTER)	FAMILY NAME (IN BLOCK LETTER)
ວັນ, ເດືອນ, ປີເກີດ: .....	ສະຖານທີ່ເກີດ: .....
DATE OF BIRTH	PLACE OF BIRTH
ສັນຊາດ: .....	ອາຊີບ: .....
NATIONALITY	OCCUPATION
ຫນັງສືຜ່ານແດນຫມາຍເລກ: .....	ອອກໃຫ້ທີ່: .....
PASSPORT No.	PLACE OF ISSUE
ອອກໃຫ້ວັນທີ: .....	ໃຊ້ໄດ້ເຖິງ: .....
DATE OF ISSUE	EXPIRATION
ທີ່ຢູ່ປະຈຸບັນ: .....	ໂທລະສັບ: .....
HOME ADDRESS .....	TEL. ....

ລູກຕິດຕາມທີ່ໃຊ້ຫນັງສືຜ່ານແດນດຽວກັນ:	1. ຊື່ (NAME) .....	ອາຍຸ (AGE) .....
CHILDREN TRAVELING WITH THE SAME PASSPORT	2. ຊື່ (NAME) .....	ອາຍຸ (AGE) .....
	3. ຊື່ (NAME) .....	ອາຍຸ (AGE) .....

ເຫດຜົນຂອງການເດີນທາງ: .....	ພາຫະນະການເດີນທາງ: .....
PURPOSE OF THE TRIP	MEANS OF TRANSPORTATION
ວັນຈະເຖິງ ສປປ ລາວ: .....	ກໍານົດຢູ່ ສປປ ລາວ: ..... ວັນ
DATE OF ARRIVAL IN THE LAO PDR	DURATION OF STAY IN THE LAO PDR DAYS
ດ່ານເຂົ້າເມືອງ: .....	
PORT OF ENTRY	

ຜູ້ຮັບປະກັນຢູ່ ສປປ ລາວ: .....	ຊື່ (NAME): .....	ໂທລະສັບ (TEL.): .....
REFERENCE IN THE LAO PDR	ທີ່ຢູ່ (ADDRESS): .....	

ຈຸດເດີນທາງຫຼັງຈາກການຢ້ຽມຢາມ ສປປ ລາວ: .....  
NEXT DESTINATION AFTER YOUR VISIT TO THE LAO PDR

ວັນທີ: .....	ລາຍເຊັນ: .....
DATE	SIGNATURE

ຄໍາເຫັນຂອງສະຖານທູດ (OFFICIAL USE ONLY)

ວິຊາເລກທີ: .....	ລົງວັນທີ: .....
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# 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