

1701 Rhode Island Ave NW Washington, DC 20036

Tel: 1-202-661-8111



## Swaziland (Eswatini) Tourist visa Application for citizens of United Kingdom living in Alberta

1	Please enter your contact information			
Name:				
Email:				
Tel:	Mobile:			
The lat	The latest date you need your passport returned in time for your travel:			
Please ma	ke sure that application forms are <b>not printed on double-sided paper.</b>			
<b>✓</b>	Swaziland (Eswatini) tourist visa checklist			
	Filled out and signed Swaziland (Eswatini) 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.			
	1 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.			
	<b>Proof of Status.</b> Copy of the front and back of valid Permanent Resident Card.			
	<b>Itinerary.</b> Copy of round trip tickets or confirmed itinerary.			



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FedEx International Priority - From \$60	Name:	
Prepaid self addressed mailer - \$0	Company:	
	Address:	
	City:	
	State:	Postal code:
		couci



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## **Swaziland (Eswatini) Tourist visa Application**

Type of visa	Validity	Processing time	<b>Embassy fee</b>	Service fee	HST	Total
Single entry	up to 90 days	2 business days	\$15.00	\$154.95	\$7.75	\$177.70
Multiple entry	up to 90 days	2 business days	\$55.00	\$154.95	\$7.75	\$217.70
Multiple entry	up to 180 days	2 business days	\$120.00	\$154.95	\$7.75	\$282.70
Multiple entry	up to 270 days	2 business days	\$175.00	\$154.95	\$7.75	\$337.70
Multiple entry	up to 365 days	2 business days	\$227.00	\$154.95	\$7.75	\$389.70

This order is subject to Terms of Service, posted on VisaHQ website.

All fees and requirements may change without notice.



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## **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:	1	CVC:		
Credit Card Billing Address:				
Signature:				
Comments:				
Thank you! We accept all major credit cards.				
VISA PayPal GSA SmartPay® 2				

IMMI(	RATION DEPARTMENT NE		NO
1.	Surname	Christi	an (or First)Names
2.	Former Name (where different f		lity (at present)
3.	Date and Place of	Birth	Sex
4.	• •	on	coming from
5.	Names, dates and p	places of birth or minor c	nildren if accompanying you:
6.	Present Address		
	(b) Telephone No		
	<b>\</b> - <b>,</b>	dress t from above)	
7.	Marital Status(Mar	ried, Single, Divorced)	
8.	Visa required for	(destination in Commonweal	th Territory)
9.	Date of previous v	risits (if any) to that cou	ntry and address
	-		
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13.			isit
	•••••	REFERENCES IN COUNTRY	OF DESTINATION
(1)	• • • • • • • • • • • • • • • • • • • •	(2)	• • • • • • • • • • • • • • • • • • • •
Pas	sport No	Iss	ued atOnOn
Va 1	id Until	Return Visa to	Valid Until
Dat	ρ	Signature of Appli	cant



## **Letter of Authorization**

		Date:
To whom it may concern:		
	authorizeessing of my visa. I have given my consenuments, as well as permission to discuss ned necessary.	t allowing him to submit
Signature of Applicant		