



# VIP PASSPORT SERVICES, INC.

2012 Louisiana Street  
Houston, Texas 77002

713-659-8472 1-800-856-8472 Fax 713-659-3767

Website: [www.vippassports.com](http://www.vippassports.com) Email: [info@vippassports.com](mailto:info@vippassports.com)

## WORK ORDER REQUEST FORM

**(RETURN THIS FORM WITH EACH REQUEST)**

### BILLING INFORMATION:

CONTACT: \_\_\_\_\_  
COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/ST: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
CELL: \_\_\_\_\_  
FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

### RETURN DOCUMENTS TO:

CONTACT: \_\_\_\_\_  
COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/ST: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
CELL: \_\_\_\_\_  
FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

### CREDIT CARD INFORMATION:

CARD#: \_\_\_\_\_  
EXP. DATE: \_\_\_\_\_ CVV#: \_\_\_\_\_

**SIGNATURE OF CARD HOLDER  
REQUIRED:** \_\_\_\_\_

### BILLING INSTRUCTIONS:

YOUR P.O. OR REF#: \_\_\_\_\_

**AUTHORIZED AMOUNT TO CHARGE MY  
CREDIT CARD: US\$** \_\_\_\_\_

TRAVELERS NAME: \_\_\_\_\_

DATE OF USA DEPARTURE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DATE YOU NEED PASSPORT: \_\_\_\_\_

VIP RESERVATION/FILE LOCATOR NUMBER: \_\_\_\_\_

SPECIAL INSTRUCTIONS: \_\_\_\_\_

### HOW DID YOU HEAR ABOUT VIP?

REPEAT CUSTOMER\_\_ INTERNET\_\_ REFERRED\_\_ BY\_\_\_\_\_ WALK-IN\_\_\_\_\_



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## GHANA VISA TOURIST VISA U.S. PASSPORT HOLDER

### DOCUMENTS REQUIRED:

VALID SIGNED PASSPORT:	<u>1</u>	APPLICATION (S):	<u>2</u>
PASSPORT TYPE PHOTO (S):	<u>2</u>	TRAVEL ITINERARY:	<u>1-COPY</u>
CURRENT BANK STATEMENT:	<u>1-COPY</u>		

OTHER: SEE NEXT PAGE FOR DETAILED INSTRUCTIONS.

**PLEASE FORWARD THIS SHEET AND ALL THE ABOVE REQUIREMENTS TO THE ABOVE LISTED ADDRESS**

### FEES PER PERSON:

VIP SERVICE FEE: (REGULAR PROCESS)	<u>\$75.00</u>
CONSULATE FEE: (SEE NEXT PAGE)	<u>                    </u>
MONEY ORDER:	<u>\$6.00</u>
** <input type="checkbox"/> SPECIAL HANDLING FEE: (SAME DAY RUSH PROCESS)	<u>                    </u>
** <input type="checkbox"/> SPECIAL HANDLING FEE: (48 TO 72 HOUR RUSH PROCESS)	<u>                    </u>
*ADD RETURN FEDERAL EXPRESS FEE:	<u>                    </u>
TOTAL: (NO PERSONAL CHECKS PLEASE)	<u>                    </u>

#### \*FEDERAL EXPRESS FEES:

PRIORITY LETTER	\$29.00
2-DAY LETTER	\$23.50
3-DAY LETTER	\$19.50
SATURDAY LETTER	\$41.50
1 <sup>ST</sup> OVERNIGHT DELIVERY	\$75.00

#### \*\*VISA PROCESSING TIME

REGULAR PROCESSING TIME: 15 TO 20 DAYS

PLEASE MARK THE APPROPRIATE BOX IF YOU NEED TO HAVE THE VISA ISSUED THE SAME DAY THAT WE SUBMIT YOUR APPLICATION (\$50.00 SPECIAL HANDLING) OR HAVE THE VISA ISSUED WITHIN 48 TO 72 HOURS (\$20.00 SPECIAL HANDLING FEE).

COMMENTS: IN THE EVENT YOU ARE REQUESTING SPECIAL HANDLING, PLEASE SEND YOUR PACKAGE BY AN OVERNIGHT COURIER THAT OFFERS AN 8:00 A.M. EARLY MORNING DELIVERY. \*\*THE CONSULATE DOES NOT ACCEPT APPLICATIONS ON FRIDAY'S.

REVISED: 10-9-2015(JENN)

**Specializing in Visas, Passports, Document Legalization and Translations**



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## GHANA TOURIST VISA

*PLEASE SUBMIT THE FOLLOWING REQUIREMENTS*

- 1.) **SIGNED U.S. PASSPORT WITH:**
  - MINIMUM OF 6 MONTHS REMAINING VALIDITY
  - ONE BLANK VISA PAGE
- 2.) **TWO (2) SIZE 2X2 PASSPORT-TYPE PHOTOGRAPHS**
  - MUST BE TAKEN WITHIN THREE (3) MONTHS FROM THE DATE OF SUBMITTING YOUR VISA APPLICATION
- 3.) **TWO (2) COMPLETED AND SIGNED VISA APPLICATIONS**  
**SPECIAL NOTE:** BE SURE TO LIST THE PHONE NUMBER ALONG WITH YOUR CONTACT INFORMATION ON QUESTION NUMBER 7 OR IT MAY CAUSE A DELAY IN PROCESSING YOUR APPLICATION.
- 4.) **PROOF OF FINANCIAL SUPPORT:**  
*(PLEASE SUBMIT ONE OF THE FOLLOWING)*
  - COPY OF MOST RECENT BANK STATEMENT
  - LETTER OF INVITE FROM GHANA HOST
- 5.) **COPY OF ROUND TRIP AIRLINE TICKETS** OR TRAVEL ITINERARY
- 6.) **CONSULATE FEE:**

VALIDITY	CONSULATE FEE
SINGLE ENTRY - REGULAR PROCESS	\$60.00
SINGLE ENTRY - RUSH PROCESS	\$100.00
MULTIPLE ENTRY - REGULAR PROCESS	\$100.00
MULTIPLE ENTRY - RUSH PROCESS	\$200.00

**VALIDITY:** THE VISA VALIDITY WILL RANGE FROM A (90) NINETY-DAY SINGLE ENTRY TO A (3) YEAR MULTIPLE ENTRY. THE LENGTH OF VALIDITY IS DETERMINED BY THE VISA OFFICER ON AN INDIVIDUAL BASIS.

**IMPORTANT:** IN ACCORDANCE WITH INTERNATIONAL SANITARY REGULATIONS ALL PERSONS ENTERING GHANA ARE REQUESTED TO HAVE A VALID CERTIFICATE OF IMMUNIZATION AGAINST YELLOW FEVER UPON ARRIVAL.

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For Official Use

Visa No.: \_\_\_\_\_  
Type of Visa: \_\_\_\_\_  
Date of Issue: \_\_\_\_\_  
Charges: \_\_\_\_\_  
Issuing Officer: \_\_\_\_\_

Please check applicable box

- Single Entry - \$60.00
- Multiple Entries - \$100.00
- Single Entry (Rush) - \$100.00
- Multiple Entries (Rush) \$200.00

(Pay by money order.  
Personal checks are not accepted)  
(Don't mail cash)

Affix passport  
Picture here

# Application for Ghana Entry Permit/Visa

Embassy of Ghana, 3512 International Drive NW - Washington DC 20008

Website: [www.ghanaembassy.org](http://www.ghanaembassy.org) Tel: (202) 686-4520

**INSTRUCTIONS:**

1. This form must be completed in **duplicate** and in *capital letters* and submitted (**together with two(2)** recent passport-size pictures) at least Fourteen (14) days before the intended date of departure.
2. Full names and addresses of references/hotel (place of stay) in Ghana should be stated (including telephone numbers, if available).
3. Any information stated on the form and subsequently found to be incorrect may render entry permit/visa void.
4. Applicants applying by post/mail should provide trackable return self-addressed envelopes.

1. (a) Surname: \_\_\_\_\_ First Name (s): \_\_\_\_\_  
Previous Name (if applicable) \_\_\_\_\_  
(b) Date of Birth: \_\_\_\_\_ (c) Place of Birth: \_\_\_\_\_  
(d) Nationality: \_\_\_\_\_ (e) Former Nationality (if any) \_\_\_\_\_  
(f) Passport No.: \_\_\_\_\_ (g) Date of Issue: \_\_\_\_\_  
(h) Place of Issue: \_\_\_\_\_ (i) Date of Expiry: \_\_\_\_\_
2. Profession/Occupation: \_\_\_\_\_
3. (a) Business Address & Tel. No. in the U.S.A: \_\_\_\_\_  
\_\_\_\_\_  
(b) Residential Address & Tel. No. in the U.S.A: \_\_\_\_\_  
\_\_\_\_\_
4. Proposed date of departure for Ghana: \_\_\_\_\_
5. (a) Traveling by:  Air  Sea  Land  
(b) Is applicant in possession of return ticket? \_\_\_\_\_ Ticket No.: \_\_\_\_\_  
(c) Amount of Money Applicant is traveling with \_\_\_\_\_
6. Purpose of Journey:  Business  Tourism  Employment  Official  Student  Transit
7. Names, Addresses and Telephone Numbers of Two (2) references or place of residence in Ghana/Name(s) of Hotel: (very important)  
(i) \_\_\_\_\_  
\_\_\_\_\_  
(ii) \_\_\_\_\_  
\_\_\_\_\_
8. If for employment, name and address of employer in Ghana \_\_\_\_\_  
\_\_\_\_\_
9. Duration of stay in Ghana: \_\_\_\_\_
10. Date of last visit to Ghana: \_\_\_\_\_
11. Applicant's signature: \_\_\_\_\_ Date of application: \_\_\_\_\_

**NB: PLEASE ENSURE YOU ENCLOSE YOUR PASSPORT WITH YOUR APPLICATION**