

ATTENTION

The Saudi consulate in Houston has informed our office that they will now require the applicant to submit a copy of their valid driver's license or state issued I.D. as proof of residence to have their visa processed by the Houston consulate.

The Houston consulate will only process visas for applicants who reside in the following states: AR, SD, LA, NE, OK, ND, MO, IL, IA, FL, MS, WI, TX, KS, MN

If you do not reside in any of the above-mentioned states we can still assist you with this request. Your visa request will have to be sent to our DC office so we can have our Liaison submit the request in person (additional fees).

Thank you,

VIP Passport Services

Updated: 7-21-2026



VIP PASSPORT SERVICES, INC.

2012 Louisiana Street
Houston, Texas 77002
713-659-8472

Website: www.vippassports.com

Email: info@vippassports.com



WORK ORDER REQUEST FORM

TRAVELER INFO:

TRAVELER NAME

TRAVELER DATE OF BIRTH

DATE OF U.S. DEPARTURE

DATE PASSPORT IS NEEDED

VIP FILE LOCATOR NUMBER

DON'T FORGET

TO EMAIL YOUR
DOCUMENTS TO OUR
OFFICE FOR OUR
COMPLIMENTARY
PASSPORT/VISA
PRE-CHECK!

BILLING INFORMATION ☐ (CHECK BOX IF SAME AS SHIPPING)

CONTACT & COMPANY NAME

ADDRESS (STREET, CITY, STATE, ZIP)

PHONE NUMBER

CELL NUMBER

EMAIL

P.O. OR BILLING REF#:

RETURN SHIPPING INFORMATION ☐ (CHECK BOX TO WAIVE SIGNATURE)

CONTACT & COMPANY NAME

ADDRESS (STREET, CITY, STATE, ZIP)

PHONE NUMBER

CELL NUMBER

EMAIL

METHOD OF PAYMENT

☐ CREDIT CARD

CARD NUMBER

EXP. DATE

CVV CODE

SIGNATURE OF CARD HOLDER

AUTH. AMOUNT \$_____

☐ MONEY ORDER

☐ CASHIER'S CHECK

☐ COMPANY CHECK

SPECIAL INSTRUCTIONS: _____

Specializing in Visas, Passports, Apostilles, Document Legalizations, and Translations



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SAUDI ARABIA TOURIST VISA

U.S. PASSPORT HOLDER

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

PROCESSING FEES

(PER APPLICANT)

VIP SERVICE FEE: (REGULAR PROCESS)	\$195.00
CONSULATE FEE: (SEE NEXT PAGE)	
ONLINE APPLICATION FEE: (SEE NEXT PAGE)	\$10.50
MONEY ORDER:	\$ 6.00
☐ SPECIAL HANDLING FEE: (LESS THAN 5 DAY PROCESS)	
OTHER FEES: _____	
RETURN SHIPPING FEE: (SEE * BELOW)	
TOTAL: (NO PERSONAL CHECKS PLEASE)	

FEDEX LETTER RETURN SHIPPING FEES (SELECT ONE)	
☐ PRIORITY OVERNIGHT	\$65.00
☐ 2-DAY	\$57.50
☐ 3-DAY	\$47.50
☐ SATURDAY - CALL	
☐ 1 ST OVERNIGHT - CALL	
☐ LOCAL DELIVERY - CALL	

REGULAR
PROCESS TIME: 5 TO 7 DAYS

PLEASE MARK THE APPROPRIATE BOX IF YOU NEED VIP TO REQUEST TO HAVE THE VISA ISSUED IN LESS THAN 5 DAYS FROM THE DAY THAT WE SUBMIT YOUR APPLICATION TO THE CONSULATE (\$50.00 SPECIAL HANDLING).

*FEDEX WILL CHARGE ADDITIONAL FEES FOR ALL RESIDENTIAL DELIVERIES. ALL SHIPPING FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE.

COMMENTS: THERE WILL BE AN ADDITIONAL \$125.00 FEDEX (TO/FROM) FEE IF
THE CONSULATE IS NOT LOCATED IN HOUSTON, TEXAS.

REVISED: 10-5-2026 (EL)



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SAUDI ARABIA TOURIST VISA

U.S. PASSPORT

PLEASE SUBMIT THE FOLLOWING DOCUMENTS:

1.) SIGNED PASSPORT

- MINIMUM OF 6 MONTHS REMAINING VALIDITY
- MUST HAVE TWO SIDE-BY-SIDE BLANK VISA PAGES

2.) ONE (1) RECENT PASSPORT-TYPE PHOTOGRAPHS (2x2)

- RECENT – WITHIN 6 MONTHS
- WHITE BACKGROUND

3.) ONE COMPLETED APPLICATION **(IF THE HARD COPY OF THE APPLICATION IS NOT COMPLETED IN ITS ENTIRETY, IT COULD CAUSE A DELAY IN THE VISA PROCESS) **THE CONSULATE WILL NOT ACCEPT ANY APPLICATIONS WITH WHITE-OUT OR OTHER HAND-MADE CORRECTIONS. PLEASE BE SURE TO USE OUR TIPS ON COMPLETING THE APPLICATION TO HELP ENSURE THERE ARE NO DELAYS IN SUBMISSION AND/OR PROCESSING.***

4.) SIGNED DECLARATION (NOTICE ON SAUDI LAWS AND REGULATIONS)

5.) PROOF OF RELATION - ORIGINAL BIRTH CERTIFICATE (FOR MINORS ONLY)

6.) CONSENT FORM FOR MINORS UNDER THE AGE OF 18

7.) COPY OF YOUR VALID DRIVER'S LICENSE OR STATE ISSUED I.D.

8.) CONSULATE FEE - \$120.50 (THIS FEE INCLUDES THE \$10.50 ENJAZ FEE)

PROCESS ADMINISTRATION FEE FOR ENJAZ ARE THE FEES ASSOCIATED TO PERFORM THE REQUIRED TRANSLATION (OF THE INVITATION), UPLOAD PHOTOS, ARCHIVE A COPY OF ALL SUPPORTING DOCUMENTS AND TO ARCHIVE A COPY OF THE VISA. THIS IS A \$50.00 VIP SERVICE FEE THAT HAS BEEN COMBINED WITH OUR \$145.00 VISA PROCESSING FEE WHICH TOTALS \$195.00.

VALIDITY: THE LENGTH OF STAY AND FOR HOW LONG THE VISA IS VALID IS ISSUED AT THE SOLE DISCRETION OF THE VISA OFFICER.

REVISED: 7-21-2026 (EL)

Photo

Photos with white background only. Off-white and colored backgrounds will not be accepted.

PLEASE USE TOOL TIPS FOR GUIDANCE ON COMPLETING THE APPLICATION (HOVER OVER FIELD FOR TOOL TIPS)



القنصلية العامة للمملكة العربية السعودية
هيوستن - تكساس
Consulate General of Saudi Arabia
5718 Westheimer, Suite 1500
Houston, Texas 77057
Tel: (713) 785-5577
Fax: (713) 785-1163

Please be sure that the information listed in this section matches the applicant's passport.

First Name:	Middle Name:	Last Name:	الإسم الكامل:
Mother's Name:			إسم الأم:
Date of Birth:	تاريخ الولادة:	Place of Birth:	محل الولادة:
Previous Nationality:	الجنسية السابقة:	Present Nationality:	الجنسية الحالية:
Place of Issue:	محل الإصدار:	Passport No:	رقم الجواز:
Expiration Date:	تاريخ انتهاء صلاحية الجواز:	Date of Issue:	تاريخ الإصدار:
Sex:	الجنس:	Marital Status:	الحالة الاجتماعية:
Female ☐ Male ☐	أنثى ☐ ذكر ☐	Married ☐ Single ☐	متزوج ☐ عزب ☐
Religion:			الديانة:
Profession:			المهنة:
Qualification:			المؤهل العلمي:
Home Address and Telephone No.:			عنوان المنزل ورقم التلفون:
E-mail Address:			البريد الإلكتروني:
Business Address and Telephone No.:			عنوان الشركة (المؤسسة) ورقم التلفون:

Home and business info must also include the phone number for each.

Purpose of Travel: ***DO NOT ANYTHING IN THIS SECTION; MARKING A PURPOSE WILL CAUSE A DELAY IN PROCESSING***										الغاية من السفر:
عمل ☐	إقامة ☐	دراسية ☐	عمرة ☐	حج ☐	دبلوماسية ☐	خاصة ☐	شخصية ☐	زيارة عائلة ☐	زيارة عمل ☐	حكومة ☐
تعميد عودة ☐	مرور ☐	سياحة ☐	تجارية ☐	رجال اعمال ☐	حكومة ☐	زيارة عمل ☐	شخصية ☐	زيارة عائلة ☐	حكومة ☐	حكومة ☐
Re-Entry ☐	Transit ☐	Tourism ☐	Commerce ☐	Businessmen ☐	Government ☐	Work Visit ☐	Family Visit ☐	Family Visit ☐	Family Visit ☐	Family Visit ☐

List full name and P.O. Box address of sponsor/ inviter in Saudi Arabia

Method of Payment: Company Check: [] Money Order: []	طريقة الدفع: <-- DO NOT MARK THIS SECTION
Name and Address of Company or Individual invitee in the Kingdom:	
اسم وعنوان الشركة او اسم الشخص الداعي وعنوانه بالمملكة:	

Complete this section to the best of your ability. If unsure of travel information, leave blank.

Travel Information:			معلومات السفر:
Date of arrival in Saudi Arabia:	Via Airline:	Flight No:	
City of Embarkation:	Port of Entry:		
Duration of Stay in the Kingdom:			

Name of traveling companion:	اسم المصحوب:	Relationship of the person traveling with:	صلته:
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*** Application must be filed out in its entirety ***

I, the undersigned, hereby certify that:

- I agree to have my fingerprints taken and my retinal scanned.
- All the information provided is correct. I will abide by the laws of the Kingdom during the period of my residence.

- أنا الموقع أؤيد وافق على اخذ بصمة الاصابع وقزحية العين
- أقر بأن كل المعلومات التي دونتها صحيحة وسأكون ملتزماً بقوانين المملكة أثناء فترة وجودي بها.

Name:	Signature:	Date:
الاسم:	التوقيع:	التاريخ:

For more information on all types of visas, log on to www.saudiembassy.net.

APPLICATION MUST BE ONLY TYPED OR HAND WRITTEN, THEY CANNOT BE BOTH.

PLEASE SIGN BACK SIDE OF APPLICATION.

IF YOUR APPLICATION IS RECEIVED WITH ANY CORRECTIONS, IT WILL CAUSE A DELAY IN PROCESSING

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القنصلية العامة للمملكة العربية السعودية
هيوسطن - تكساس

NOTICE ON SAUDI LAWS AND REGULATIONS

I hereby undertake to give my fingerprints and my eye iris pattern images and comply with the laws of the Kingdom of Saudi Arabia.

I, the undersigned, hereby agree to have my fingerprint and iris data (biometrics) captured as part of the application procedure for an entry visa to the Kingdom of Saudi Arabia. I further agree and declare as follows:

1. If granted the visa, I shall abide by all the laws and regulations of the Kingdom of Saudi Arabia and respect the Islamic customs and traditions of its people;
2. I am aware that all alcoholic beverages, narcotics and other illegal drugs, pornographic materials or publications that violate the social norms of decency and all other publications that are disrespectful of any religious belief or political orientation are prohibited and shall not be brought into the Kingdom of Saudi Arabia;
3. I am also fully aware that the crime of smuggling narcotics and other illegal drugs into the Kingdom of Saudi Arabia is punishable by the death penalty;
4. I have never been removed, excluded or deported from the Kingdom of Saudi Arabia or from any other Gulf Cooperation Council member state or charged with violation of any law or regulation thereof;
5. I agree to depart the Kingdom of Saudi Arabia on or before the expiration date of my visa. I am well aware that any violation of the laws and regulations of the Kingdom or any engagement in prohibited activities, such as the activities mentioned herein or in the entry visa documentation, are subject to the penalties described in the "Dealing with Persons on Entry Visas" statute, as enacted by Royal Decree No. 42, dated 10/18/1404 H;
6. I acknowledge and reaffirm my declaration that this application and the evidence submitted with it are all true and correct. I also understand that if I submit any false information or if my name was found to be listed as banned from entry into the Kingdom of Saudi Arabia, my application will be denied or my visa, if already granted, revoked. Moreover, I may be turned back from any Saudi port of entry at my own expense, while I shall have no right to demand compensation.

Name (Please print): _____

Signature: _____

Date: _____



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SAUDI ARABIA TOURIST VISIT VISA

EXAMPLE OF MINOR AUTHORIZATION FORM

(DATE)

DEAR VISA OFFICER, SAUDI ARABIA CONSULATE GENREAL,

OUR CHILD, (CHILD'S NAME), WILL BE TRAVELING TO SAUDI ON (DATE OF TRAVEL), ACCOMPANIED BY (NAME OF ACCOMPANYING PARENT), TO MEET AND VISIT WITH (NAME OF PARENT RESIDING IN SAUDI). (CHILD'S NAME) WILL BE RETURNING TO THE UNITED STATES ON OR BEFORE (DATE OF RETURN).

PLEASE ISSUE THE APPROPRIATE FAMILY VISIT VISA TO (NAME OF CHILD). IF YOU HAVE QUESTIONS, PLEASE FEEL FREE TO CONTACT US AT (ACCOMPANYING PARENT'S PHONE NUMBER).

REGARDS,

(SIGNATURE OF MOTHER)

(MOTHER'S NAME)

(SIGNATURE OF FATHER)

(FATHER'S NAME)

****IMPORTANT****

PLEASE BE SURE
THAT THIS LETTER IS
SIGNED BY BOTH
PARENTS &
NOTARIZED
ACCORDINGLY!