

Oman Visa Instructions for Adventure Center Clients

G3 Visas & Passports
3300 North Fairfax Dr., Ste 220
Arlington, VA 22201
Tel: (888) 883-8472, (703) 276-8472
Fax: (703) 524-3374
Email: info@g3visas.com

Please send the following to G3 Visas & Passports:

1. **Please submit your original valid and signed passport** (The passport must have at least one blank visa page for the visa and must be valid for 6 months from the end of your trip).
2. One visa application form completed and signed.
3. One 2" x 2" passport size photograph.
4. Non US citizens submit valid I-94 or a copy of your Alien Registration Card.
5. Copy of flight itinerary from Adventure Center.

Please send this sheet with all fields completed; only one is required per family.

Contact and Shipping Information:

(Street Address Only, NO P.O. BOXES)

Name _____

Address _____

City _____

State _____

Zip Code _____

Tel # _____

Fax # _____

Date of Birth _____

Passport # _____

Date Departing US _____/_____/_____

Date Passport Needed _____/_____/_____

Email Address : _____

(We will email you the tracking number when your visas are complete.)

Shipping Fees:

All return shipping fees are included. Your passport will be returned via Federal Express. Federal Express cannot deliver to P.O. Boxes; please provide your home street address or work address.

Fees:

Payment includes Embassy fee, service fee, and return shipping via Federal Express. **Visas will take three weeks to process.**

One entry with 21 day stay \$92.00

This visa is valid for 3 months from the date of issue

Number of Travelers x \$92.00: \$_____

- Please submit an **expedite fee of \$40.00 per traveler** if you require your passport returned **in less than three weeks.**
- Consular fees subject to change without notice.

Payment Information:

All fees are payable to G3 Visas by:

- American Express
- Visa/MasterCard
- Check/Money Order

Requirements and fees are subject to change without prior notice.

I authorize G3 Visas to charge the amount of \$_____

plus a 5% processing fee to my credit card number

Expiration date _____/_____/_____ Security Code _____

Signature of cardholder _____

(11/09)



№ 115925

إستمارة طلب تأشيرة دخول
VISA APPLICATION FORM

تأشيرة المقيمين في دول مجلس التعاون AGCC Foreign Residents Visa	تأشيرة لقيادي الشاحنات Truck Drivers Visa	تأشيرة زيارة سياحية Tourist Visit Visa	تأشيرة الرحلات المتعددة Multiple - entry Visa
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Type Of Passport نوع الجواز	Expiry Date تاريخ الانتهاء / /	Date Of Issue تاريخ الإصدار / /	Passport No. رقم الجواز
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الجنس Sex	الجنسية Nationality	مكان الإصدار Place of Issue
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الإسم الثالث Third Name	الإسم الثاني Middle Name	الإسم الأول First Name
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اللمنة Occupation	تاريخ الميلاد Date of Birth / /	مكان الميلاد Place of Birth	إسم العائلة Family Name
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رقم التأشيرة السابقة (إن وجدت) Previous Visa No (if any)	رقم الرحلة Flight No.	منفذ الدخول Point of Entry
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العنوان داخل السلطنة Address in Oman

Accompanying Persons in the Passport (if any)

أسماء المرافقين في الجواز (إن وجد)

الجنس Sex	مكان الميلاد Place of Birth	تاريخ الميلاد Date of Birth	الإسم الكامل Full Name
		/ /	
		/ /	
		/ /	

FOR OFFICIAL USE ONLY

للاستعمال الرسمي فقط

جهة إصدار التأشيرة	رقم التأشيرة /
	تاريخ الإصدار / /