





| Contact Detai | ls | | | | |
|---|----------------------|---|--------------------|------------|--|
| Name: | | Telephone number: | | Ema | |
| Delivery Methorequire) Special Delivery | d (please tick the s | service you Courier | Passpo | ort and | Visa Return Address |
| Special Instru | ctions: | | | | |
| | | | | | |
| Application D | etails (name and | nationality) | Travel D |)ate | Passport Number |
| 1 | etans (name and | mationality) | liaver | Zeite. | assport (valide) |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| | Requ | ired VISA and | SERVICE d | etails | rate de la companya d |
| VISA type and SE | RVICE type (please | write the type | of visa and s | ervice w | which you are applying for a |
| • • | | | | | |
| | METH | ODS OF PAY | /MENT (ple | ase tick | |
| CARD PAYMENT | | CHEQUE (made payable to united bic ltd) | | | PAYMENT IN PERSON (Collect only) |
| | For Card I | Payment only pleas | se complete det | ails below | |
| Card Number Name on Card | Expiry Date | | Security Number | | Registered Card Address |

I agree to the terms and conditions that are stated on the website and I agree for China Visa Services to proceed with my applications and debit my account with the correct fees.

SIGNATURE:

DATE:

PRINT NAME: