

Mail documents to: VisaHQ.co.uk Ltd.

24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



## **Guatemala Tourist visa Application**

!	Please enter your contact information							
Name:								
Email:								
Tel:	Mobile:							
The late	The latest date you need your passport returned in time for your travel:							
<b>~</b>	Guatemala tourist visa checklist							
	Filled out and signed Guatemala 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.							
	<b>1 Photographs.</b> Standard passport photographs 35mm x 45mm on a white background.							
	Payment. Credit Card Authorization form, Postal Order payable to VisaHQ.co.uk.							
	<b>Proof of Status.</b> Original ILR card or other proof of resident status in the UK, this should be valid for more than 6 months after your from Guatemala.							
	Itinerary. Copy of round trip tickets or confirmed itinerary.							
	Bank Statement. Copy of a recent bank statement showing proof of sufficient funds.							
	<b>Employment Letter.</b> An original letter from your employer/school (on business letterhead, with contact details), stating that a of absence has been granted and that you will be returning to your current job. The Employment Letter must be addressed to							
	mala High Commission If you are self-employed, include a copy of your business license and tax return. If you are retired please							
submit	proof of your retirement fund.							
	Photocopies. You are required to provide photocopies of all application materials, including the main pages of your passport.							



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Type of visa	Validity	Processing time	<b>Embassy fee</b>	Service fee	VAT	Total
Single Entry	up to 90 days	Up to 6 weeks	£25.00	£120.00	£24.00	£169.00

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.co.uk Terms of Service and authorize to charge my credit card for the amount of  ${\bf f}$ 

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.













