

Dear Visa Applicant(s),

Bales Worldwide have recommended CIBT to assist you in applying for your Uganda tourist visa(s). Please ensure you read the following information thoroughly and submit this form when returning your application.

DEADLINE: Documents must be received by CIBT **no earlier than 3 months** prior to entry into Uganda but no later than 12 calendar days prior to the date you require your passport(s) back.

- Late submission fees of £5.88 per person will apply if you allow fewer than 12 days for processing.

REQUIREMENTS FOR BRITISH CITIZENS ONLY

Please send the following documents (per applicant):

- British Citizen Passport. It must have 6 months validity beyond the completion of your trip. It must be in tidy condition and have at least one blank page.
- One application form, signed and dated. Please complete the form neatly, in capitals, in black ink.
- One passport-type photograph. It must be in colour on a plain background.
- Copy of booking confirmation / travel itinerary (provided to you by Bales).
- Completed CIBT Order Form (overleaf) and payment for visa application (see note below).

PAYMENT

| | COST PER PERSON | SUBTOTAL |
|---|-----------------|----------------------|
| Uganda (single entry tourist visa) | £53.20 | <input type="text"/> |
| <i>The above cost includes consular fees, handling fees and VAT.</i> | | |
| <i>Please add £5.64 per household for Royal Mail Special Delivery Post for deliveries within the UK.</i> | | + £5.64 |
| | TOTAL | ===== |

SENDING YOUR APPLICATION

Once you have completed your application, please send it by **Royal Mail Special Delivery** to:

**CIBT
PO BOX 61745
LONDON
SW1V 1UT**

Should you have any further queries regarding your visa application please call CIBT on 0844 800 4650 (option 2)

info@uk.cibt.com

CIBT ORDER FORM

(this form must be completed in full and submitted to CIBT with your visa application documents)

BALES / 24 / BALES

@CIBT UK LTD. December 17th 2009

CONTACT DETAILS:

| | | | |
|------------------------------------|--|--------|-----------|
| Name: | | | |
| Address for return of passport(s): | | | |
| | | | POSTCODE: |
| Phone: | | Email: | |

PASSPORT DETAILS:

| | Name | Passport Number |
|---|------|-----------------|
| 1 | | |
| 2 | | |

| TOUR DEPARTURE DATE: | TOUR ENDING DATE: | LATEST DATE YOU NEED YOUR PASSPORT(S) RETURNED: |
|----------------------|-------------------|---|
| | | "asap" is not a valid option please be aware of the "late submission fees" stated overleaf |

Please note: CIBT highly recommends the passport replacement service. If you lose your current passport, CIBT will assist you in obtaining a replacement. A charge of £6.95+VAT per person for passport replacement service will automatically be added to the CIBT fee paid for all UK passport holders.

Visit <http://cir.uk.cibt.com/passportreplacement> for coverage details. Check this box to decline coverage:

PAYMENT DETAILS:

Please note we do not accept payment by cash, cheque or postal orders.

I HEREBY AUTHORISE CIBT TO CHARGE A VARIABLE AMOUNT TO MY CREDIT/ DEBIT CARD FOR PROCESSING AND DESPATCH OF MY/OUR VISA/S (payments by credit card incur a surcharge of 1.25%)

CARD NUMBER:

EXPIRY DATE: CCV NUMBER: (3 digits for most cards, 4 digits for AMEX)

CARD TYPE: _____ ISSUE NO (if applicable):

CARD HOLDER: _____ SIGNED: _____ DATE: _____

CIBT will make every effort to secure the visa or visas you require for your trip, and for the date requested. However, it is important that when we return your passport and documents to you, that you verify that all the visas you require for your trip have been obtained, that the visas for each country you intend to visit are valid for the dates of your visit, and that your passport is valid for the appropriate time you are abroad. By engaging CIBT you agree that the sole remedy against CIBT for damages in connection with the failure to obtain a requested visa or visas shall be the return of the service fee charged (up to a maximum of £250). Embassy fees, postage fees, processing times and requirements are subject to change without notice. The application form contained in this visa pack may be valid for use only through CIBT. Postage costs refer to shipments in the UK. Cancellations incur a £15+vat surcharge per person. CIBT's full terms and conditions can be found at: <http://uk.cibt.com/terms>



UGANDA VISA APPLICATION FORM

This form must be fully completed in English using blue or black ink. Please attach one (1) passport size photograph.

Type of visa required: Put a cross (x) in the relevant box.

Tourist Business Other (please specify)

Validity of visa: Put a cross (x) in the relevant box

Single Entry (3 months) Other (please specify)

What is the purpose of your visit to Uganda?

How long will you stay in Uganda?

Travel Dates:

What is your date of travel?

Which date will you leave Uganda?

Part 1 Personal Details

1.1 Given Names (as shown in your passport)

1.2 Family name (as shown in your passport)

1.3 Other names (include all previous names used)

1.4 Sex (Put a cross (x) in the relevant box)

Male Female

1.5 Current Occupation

1.6 Previous Occupation

1.7 Marital Status (Put a cross (x) in the relevant box)

Single Married Divorced/Separated Widowed

1.8 Date of Birth

1.9 Place of Birth

1.10 Country of Birth

1.11 Nationality

Part 2**Your Contact Details**

2.1 Give your UK / EU residential address 2.2 Give your contact address in Uganda

Post Code:

2.3 Home (landline) phone contact

2.4 Mobile phone contact

2.5 Email address contact

Part 3**Passport Information**

3.1 Your Current Passport Number

3.2 Place of issue

3.3 Issuing Authority

3.4 Date of issue

3.5 Date of Expiry

Part 4**Previous Applications**4.1 Have you travelled to Uganda in the past 5 years? Yes No *If 'Yes' please provide details in the box below.*

| Date | Destination | Purpose | Duration |
|------|-------------|---------|----------|
| | | | |

Part 5**Declaration**

The information I have given in this form is complete and true to the best of my knowledge and the attached photograph is a true likeness of me.

Signature

Date

For Official use only:

| | |
|--|--|
| | |
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 Visa Fee Rcvd

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 Dispatch Date:

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 Recorded Del No:

| | |
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 Authorising Officer:

| | |
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| | |
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 Remarks:

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Purpose

Duration

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Signature

Date

For Official use only:

Visa Fee Rcvd

Dispatch Date:

Recorded Del No:

Authorising Officer:

Remarks: