

## TRAVEL VISA PRO ORDER FORM

Call us for assistance – 866-378-1722 Fax – 866-511-7599 www.TravelVisaPro.com info@TravelVisaPro.com

## **US PASSPORT CONCIERGE SERVICE\***

Travel Visa Pro will review your documents and prepare application for you to sign within three hours from receipt of your forms. Requests received outside business hours (5AM PST – 5PM PST Monday-Friday) will be completed the following business morning.

To engage in this service, please:

Step: #1 – Complete the following pages to sign up

Step: #2 – Make a copy of your passport vital pages (signature and photo page)

Step: #3 – Email to concierge@travelvisapro.com or fax to 1-866-511-7599 the following pages:

- a) Copy of this payment (see below)
- b) Copy of your most recent passport (if available)
- c) Copy of handwritten application
- \* If you do not wish to sign up for \$35 concierge service, please do application yourself on government website: https://pptform.state.gov/

PLEASE RETURN THE COMPLETE FOR ME TO SIGN VIA:  □ EMAIL:				
☐ FAX:				
PAYMENT METHOD FOR APPLICA	ABLE FEES:			
\$35.00 per application *	(# of applications) =	(gra	nd total)	
Please add \$25 for FedEx Priority I hereby authorize Travel & Visa Pro to charge amount to my credit card company and agree to change without prior notice and all fees are	to terms and conditions. I understand the	sport service	es to the following card. I ag	gree to pay thi
Name on Card:	Signature:_			
Credit Card #:	Expiration Date:	/ mm		
Billing Address:				
Please bill the remainder of the ch	narges to my card on file.			



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# New, Lost/stolen, or Passport for Child - Passport Concierge Service (please complete all fields)

Book Specifications:	<ul><li>□ US Passport Book and US Passport Card k (standard) OR ok (non-standard)</li></ul>
1. Personal Information	
Surname:	
First and middle names:	
Place of birth (city, state, country):	
Sex: □ Male □ Female	Date of Birth://
Social Security Number:	
Mailing Address:	
Home Phone:	Mobile Phone:
Work Phone: Er	nail Address:
Permanent Address (if different from	mailing address):
List all other names you have used (i	.e., maiden names):
Reason for name change:	
Place and Date of name change:	
Height: Hair Color	:: Eye Color:
Employer or School:	



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### 2. Emergency Contact and Family Information

Name of Emergency Contact:	
Address:	
Phone Number:	
Relationship:	
Name of Father:	
Father's date of birth://	
Father's place of birth:	Citizenship:
Name of Mother:	
Mother's date of birth://	
Mother's place of birth:	_ Citizenship:
Have you ever been married? □ Yes □ No	
[if marked yes, you must complete the information	below for current or most recent spouse]
Name of Spouse:	
Spouse's date of birth://	
Spouse's place of birth:	Citizenship:
3. Travel Plans	
Date of next international trip://	
Duration of trip:	
Countries to be visited:	