

Z-WOW RUSSIAN VISA ORDER FORM

Application Information	Surname:	Forename:	Gender:
	Nationality:	Passport No:	Passport Expiry Date:
	Date of Birth:	Home Tel No:	Mobile No:
	Email:		
	★ Your Passport Must in your hand on :		
Correspondent Information	Surname:	Forename:	Gender:
	Home Tel No:	Mobile No:	Email:
Delivery Information	Surname:	Forename:	Gender:
	Home Tel No:	Mobile No:	Postcode:
	Address:		
Delivery Instruction	<input type="checkbox"/> Collect In Person		
	<input type="checkbox"/> Royal Mail Special Delivery		
	<input type="checkbox"/> Same Day/ Next Day Courier		
Normal Service Fee	<input type="checkbox"/> Single	£125	<input type="checkbox"/> Tourist <input type="checkbox"/> Business <input type="checkbox"/> Transit <input type="checkbox"/> Private
	<input type="checkbox"/> Double	£136	
	<input type="checkbox"/> Multiple	£280	
	<input type="checkbox"/> Single For US Passport	£153	
	<input type="checkbox"/> Double For US Passport	£153	
	<input type="checkbox"/> Multiple For US Passport	£170	
Next Day Service Fee	<input type="checkbox"/> Single	£210	<input type="checkbox"/> Tourist <input type="checkbox"/> Business <input type="checkbox"/> Transit <input type="checkbox"/> Private
	<input type="checkbox"/> Double	£229	
	<input type="checkbox"/> Multiple	£398	
	<input type="checkbox"/> Single For US Passport	£249	
	<input type="checkbox"/> Double For US Passport	£249	
	<input type="checkbox"/> Multiple For US Passport	£369	
Payment Method	1. Pay by card		
	2. Bank transfer to our Barclays business account Account name: Z-WOW LTD Account number: 00724246 Sort Code: 20-71-82 (Bear in mind: keep your bank reference number, then email us with it)		
	3. Pay online		
	4. Pay cheque to Z-WOW LTD / Cash payment		

Z-WOW CARD AUTHORISATION FORM

Debit Card (No Surcharge)	Visa Debit <input type="checkbox"/> Solo <input type="checkbox"/> Visa Electron <input type="checkbox"/> Maestro <input type="checkbox"/>																							
Credit Card (3% Surcharge)	Visa Credit Card <input type="checkbox"/> Master Card <input type="checkbox"/>																							
I authorise Z-WOW LTD to debit my credit / debit card with the sum of: £ _____ I understand that Z-WOW LTD will also charge additional surcharge of 3% if I pay by credit card.																								
Debit Card/Credit Card Information	Card valid from / (mm/yy) Card expiry date / (mm/yy) Debit Card Issue No. () Address card is registered to Card No <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> <td style="border: 1px solid black; width: 25px; height: 20px;"></td> </tr> </table> Security No. (last 3 digits on security strip) <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 30px; height: 20px;"></td> <td style="border: 1px solid black; width: 30px; height: 20px;"></td> <td style="border: 1px solid black; width: 30px; height: 20px;"></td> </tr> </table>																							
BY SIGNING THIS FORM, YOU CERTIFY THAT YOU ARE CONSENTING TO THIS TRANSACTION AND UNDERSTAND THE MEANING OF THIS FORM																								
Cardholder's Signature Date:																								
Cardholder's Name (block capitals – as it appears on the debit/credit card)																								
You agree to the Terms and Conditions on Z-WOW Ltd's website (http://www.zwowvisas.co.uk/terms-of-use) before sending us your form and other documentation.																								



VISA APPLICATION

I declare that data supplied by me is correct and complete. I am aware that any false statements will lead to my application being rejected or to the annulment of a visa already granted and may also render me liable to prosecution under Russian law. I undertake to leave the territory of the Russian Federation upon the expiry of the visa, if granted. I understand that possession of a visa does not entitle its bearer to enter Russia. I will not seek compensation if I am refused to enter Russia.

**** - not to be filled by holders of diplomatic and official passports**

1. Nationality (If you formerly had USSR or Russian citizenship, please indicate when and why you lost it)	6. Purpose of visit
	7. Category and type of visa

2. Last name (as in passport)	8. Number of entries Single entry <input type="checkbox"/> Double entry <input type="checkbox"/> Multiple entry <input type="checkbox"/>
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3. First and middle names (as in passport)	9. Date of entry in Russia (dd/mm/yy)	10. Date of departure from Russia (dd/mm/yy)
4. Date of birth (dd/mm/yy) 5. Sex M <input type="checkbox"/> F <input type="checkbox"/>		

11. Passport No Issued by	Date of issue (dd/mm/yy)
	Valid until (dd/mm/yy)

12. Type of passport other <input type="checkbox"/> diplomatic <input type="checkbox"/> official <input type="checkbox"/> tourist <input type="checkbox"/> please specify

13. Russian institution or organization to be visited? (for tourists – name and reference number of the host tourist company, for businessmen – name of the host organization and town, for private persons – last name, first name, middle names and home address of the host)

14. Itinerary (places of visit)

**15. Do you have a medical insurance valid in Russia? yes <input type="checkbox"/> Please specify? no <input type="checkbox"/>
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16. Who will pay for your trip to and stay in Russia?
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17. Marital status married <input type="checkbox"/> single (never married) <input type="checkbox"/> divorced <input type="checkbox"/> separated <input type="checkbox"/> widowed <input type="checkbox"/>
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18. Spouse's full name (if divorced or separated, please indicate maiden name if applicable)	19. Spouse's date of birth (dd/mm/yy)
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20. Spouse's place of birth

**21. Your father's full name	**22. Your mother's full name
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23. Have you ever been issued a Russian visa? (When and where?)

**24. Has your passport ever been lost or stolen? yes <input type="checkbox"/> no <input type="checkbox"/>

**25. List all countries you have visited in the last ten years and indicate the year of visit	**26. List all countries which have ever issued you a passport
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**27. List your last two places of work, excluding the current one	
1. Name Address Your position	Phone number Your chief's surname Dates of joining – dismissal (mm/yy) (mm/yy)
2. Name Address Your position	Phone number Your chief's surname Dates of joining – dismissal (mm/yy) (mm/yy)

**** - not to be filled by holders of diplomatic and official passports**

****28. List all educational institutions you ever attended, except high schools**

1. Name	Address and phone number
Course of study	Dates of admission and graduation (mm/yy) (mm/yy)
2. Name	Address and phone number
Course of study	Dates of admission and graduation (mm/yy) (mm/yy)

**29. List all professional, civil and charity organizations which you are / were a member of or cooperate / cooperated with	**30. Do you have any specialized skills, training or experience related to fire-arms and explosives or to nuclear matters, biological or chemical substance? If yes, please specify
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****31. Have you ever performed a military service? If yes, indicate the country, branch of service, rank, military occupation and dates of service**

****32. Have you ever been involved in an armed conflicts, either as a member of the military service or a victim? If yes, please specify**

33. IMPORTANT! EACH APPLICANT MUST READ AND GIVE ANSWERS TO THE FOLLOWING QUESTIONS
A visa may be refused to persons who are within specific categories defined by the law as inadmissible to Russia.

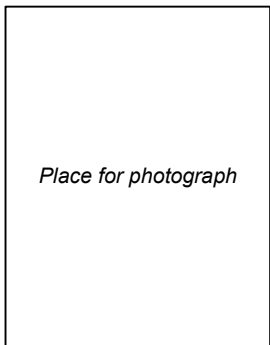
Have you ever been arrested or convicted for any offence? yes <input type="checkbox"/> When? (dd/mm/yy) Where? no <input type="checkbox"/>
Have you ever been afflicted with a communicable disease of public health significance or a dangerous physical or mental disorder? Have you ever been a drug abuser or a addict? yes <input type="checkbox"/> no <input type="checkbox"/>
Have you ever been refused a Russian visa? yes <input type="checkbox"/> When? (dd/mm/yy) Where? no <input type="checkbox"/>
Has your Russian visa ever been canceled? yes <input type="checkbox"/> When? (dd/mm/yy) Where? no <input type="checkbox"/>
Have you ever tried to obtain or assisted others to obtain a Russian visa or enter Russia by providing misleading or false information? yes <input type="checkbox"/> no <input type="checkbox"/>
Have you ever overstayed your Russian visa or stayed unlawfully in Russia? yes <input type="checkbox"/> no <input type="checkbox"/>
Have you ever been deported from Russia? yes <input type="checkbox"/> When? (dd/mm/yy) Where? no <input type="checkbox"/>

Your answer yes in item 33 does not automatically signify ineligibility for a visa. In this case you may be required to personally appear before a consular officer.

34. Name, address and phone number of a person or hotel in Russia that you plan to stay with

35. Has this application been completed personally by you? If no, indicate the person completing this application in item 36 yes no

36. Application completed: Surname, first name Relationship to applicant Applicant's address



I agree to my personal data on this application form being processed and communicated to the appropriate Russian authorities for the issue of a visa.

Date (dd/mm/yy), applicant's signature

37. Other names ever used (maiden name, pen-name, holy orders, et..)

38. Your permanent address, phone and fax number, E-mail

39. Place of birth (If born in Russia, please indicate when and what country you emigrated to)

40. Place of work or study, present position (name, address, phone and fax numbers, E-mail)

41. Are any of your relatives staying in Russia now? (full name, relation degree, date of birth, permanent address)