

**TRAVEL THE WORLD VISAS, INC**  
 1930 18<sup>th</sup> Street NW, Unit #1, Washington DC 20009  
 www.world-visa.com  
 Tel. 202-223-8822  
 Fax 530-579-3315  
 Email: info@world-visa.com



... LINKING YOU WITH YOUR GLOBAL DESTINATION!

**Australia / ETA**

Please complete and print this application form. **Please answer all data elements legibly, sign and e-mail or fax us this application form along with a clear copy of the personal data page of the applicant.**

**Email: info@world-visa.com Fax: 530-579-3315**

A separate application form is required for each applicant. Incomplete forms may delay processing.

Purpose	<input type="checkbox"/> Tourist	
	<input type="checkbox"/> Business - 1 year	<input type="checkbox"/> Business - 10 years

**Traveler Personal Information**

Last Name (exactly as in passport)			
First Name (exactly as in passport)			
Middle Name			
Sex	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Date of Birth (mm/dd/yyyy)			
Country of Birth			
Citizenship			
Passport Number			
Passport Expiration Date (mm/dd/yyyy)			
Passport Issuing State			
Passport Date of Issue (mm/dd/yyyy)			
Passport Issuing Authority/ Place of Issue			
Date of Entry (mm/dd/yyyy)			
Complete Home address of the applicant (Street, City/Town, State, Zip/Postal Code, Country)			
Telephone		Email	
Does applicant hold citizenship of other countries (If YES, please list all countries)			

**AUTHORIZATION TO CHARGE CREDIT CARD/DEBIT CARD:**

I, \_\_\_\_\_, authorize Travel the World Visas to charge for all fees and costs (including a 4% credit card convenience fee) associated with this request to my (circle one) American Express / MasterCard / Visa card / Discover card.

Signature \_\_\_\_\_ Card No. \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_ Zip \_\_\_\_\_