

Master Visa Service
230 South Clark St. Suite 400, Chicago, IL 60604
Toll Free 1.800.516.2778 Tel 1.630.363.9553 www.mastervisaservice.com
ORDER FORM FOR BRAZILIAN TOURIST VISA

1. Travel Date: _____ Date Need Visa Back: _____

2. Name of Applicant(s)

FIRST

MIDDLE

LAST

3. Fees

Tourist Visa:

Consulate Fee (Per Visa): \$150.00

MVS Service Fee (Per Visa): \$49.00 \$_____ (Rush Fee)

FedEx Fee (Or Send Pre-Paid Self Addressed Stamped Return Envelope):

FedEx Fee (max 5 Visas): \$25.00

Total: \$_____

4. Shipping Address and Contact Info

Please remember to provide the exact address that you want your visas sent to. An incorrect address will slow things down and cause extra fees. FedEx does not deliver to PO Boxes.

Name: _____

Address: Street _____

City _____ State _____ Zip _____

Contact Phone: _____

Email Address: _____

5. Payment* We accept Visa, Mastercard, Amex and Discover. We also accept money orders.

*Credit card payment is subject to a 3% charge

Card Type: Visa Mastercard Amex Discover

Card Holder: (On card) _____

Credit Card #: _____

Exp. Date _____ / _____ CVV/CVC _____ (On back of Card) Billing Zip Code: _____

I understand that all fees are non-refundable. I authorize Master Visa Service to charge the amount due to my Credit Card.

Signature

Date

Internal Use Only:
Date Received: _____
Order # _____