



# ORBIT VISAS, LLC. Order Form

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Website: [www.OrbitVisas.com](http://www.OrbitVisas.com)

DEPARTURE DATE: \_\_\_\_\_

NEED BACK DATE: \_\_\_\_\_

APPLICANT(S):			
1) First Name:	Last Name:	Date of Birth:	Passport No:
2)			
3)			
<input type="checkbox"/> <b>VISA(S) SERVICES</b> <input type="checkbox"/> <b>INTERNATIONAL DRIVER LICENSE</b> <input type="checkbox"/> <b>TRANSLATION</b>			
COUNTRY		VISA TYPE <i>(If applicable)</i>	# OF ENTRIES <i>(If applicable)</i>
1)			
2)			
3)			
PASSPORT(S) SERVICES			
<input type="checkbox"/> First Time/New Passport <input type="checkbox"/> Passport Renewal <input type="checkbox"/> 2nd Passport <input type="checkbox"/> Name Change <input type="checkbox"/> Lost or Stolen Passport			
<input type="checkbox"/> Damaged Passport <input type="checkbox"/> Passport for a Child <input type="checkbox"/> Passport Card			
RETURN SHIPPING/FedEx		RETURN SHIPPING/UPS:	
<input type="checkbox"/> \$45.00-FedEx-next day air		<input type="checkbox"/> \$30.00-UPS-next day air	
Shipping rates exclude Alaska, Hawaii, and Puerto Rico			
PAYMENT METHOD:			
<input type="checkbox"/> <b>Credit Card</b> <input type="checkbox"/> <b>Company Check</b> <input type="checkbox"/> <b>Money Order</b> <input type="checkbox"/> <b>Cashier Check</b>			
Credit Card Type:	Credit Card Number:	Expiration Date:	
Name on Card:	Security Code:	Billing Zip Code:	
<p>I authorize Orbit Visas to charge my credit card for the above service(s), I understand that requirements and fees are subject to change without prior notice.</p> <p>All fees are non-refundable.</p>			
<b>SIGNATURE:</b>		<b>DATE:</b>	
Money order, Company Check, and Cashier Checks – Payable to <b>ORBIT VISAS, LLC.</b>			
RETURN SHIPPING ADDRESS VIA FedEx/UPS:			
Company Name <i>(if applicable)</i> :			
Street <i>(Do not use P.O. Box)</i> :			
Suite/Apt #:			
City:		State:	Zip Code:
Recipient's Name:		Phone No:	
Email Address:			
SOURCE:			
How did you hear about us?			
<input type="checkbox"/> Google <input type="checkbox"/> Yahoo! <input type="checkbox"/> Bing <input type="checkbox"/> Referral <input type="checkbox"/> Current client <input type="checkbox"/> Other: _____			