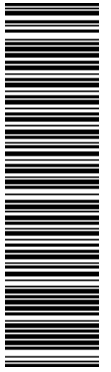


Mail documents to: VisaHQ.com Inc.  
2005 Massachusetts Avenue  
Washington, DC 20036

Tel: (800)345-6541



## Mali Tourist visa Application



### Please enter your contact information

**Name:**

**Email:**

**Tel:**  **Mobile:**

**The latest date you need your passport returned in time for your travel:**



### Mali tourist visa checklist

- Filled out and signed Mali tourist visa application form.** The form is enclosed.
- Original passport.** Passport must have at least 6 months remaining validity and have at least 1 visa page.
- 2 Photographs.** Standard passport photographs 2x2 inches on a white background.
- Payment.** Credit Card Authorization form, Certified Check, or Money Order payable to VisaHQ.com.
- Return mailer.** Prepaid self-addressed return label or payment for FedEx.

If you wish to prepay return shipping, please add the shipping fee to the total and provide return address:

- FedEx 2nd day delivery - add \$15
- FedEx Standard Overnight - add \$20
- FedEx Priority Overnight - add \$25
- FedEx Saturday delivery - add \$45
- FedEx First Overnight - add \$65
- Prepaid self addressed mailer - \$0
- Local pick up in Washington - \$0

**Name:**

**Company:**

**Address:**

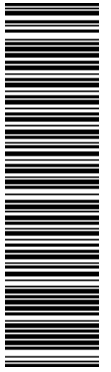
**City:**

**State:**  **Zip:**

- Itinerary.** Copy of round trip tickets or confirmed itinerary.
- Yellow Fever Vaccination.** Copy of International Certificate of Vaccination for Yellow Fever.
- Hotel Reservations.** Copy of confirmed hotel reservations.

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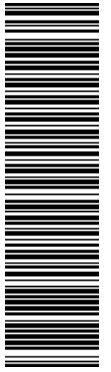
Tel: (800)345-6541



**Letter of Invitation.** If staying with friends or family, a letter of invitation from the host in Mali, can be used instead of the hotel reservation. The letter should be addressed to the Embassy of Mali, Visa Section and should state the relationship to the applicant, the dates of the visit, and the address and phone number where you will be staying.

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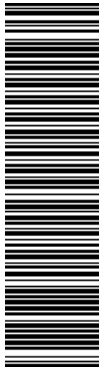
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## Mali tourist visa fees for citizens of United States

|                          | Type of visa   | Max. validity   | Embassy fee | Our fee | Processing time   | Total    |
|--------------------------|----------------|-----------------|-------------|---------|-------------------|----------|
| <input type="checkbox"/> | Multiple entry | up to 1825 days | \$131.00    | \$44.95 | 5 business days   | \$175.95 |
| <input type="checkbox"/> | Multiple entry | up to 1825 days | \$141.00    | \$59.95 | 3 business days   | \$200.95 |
| <input type="checkbox"/> | Multiple entry | up to 1825 days | \$151.00    | \$69.95 | Next Business Day | \$220.95 |
| <input type="checkbox"/> | Multiple entry | up to 1825 days | \$181.00    | \$99.95 | Same Day          | \$280.95 |

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Washington, DC 20036  
Tel: (800)345-6541



## Credit Card Authorization Form

I authorize VisaHQ.com to charge my credit card for the amount of \$

Name on the Credit Card:

Credit Card number:

Exp. date:

Credit Card Billing Address:

Signature:

Comments:

**Thank you!**  
**We accept all major credit cards.**



**For Official Use**

Numéro de Code

Visa du Chef du  
Service Consulaire



**AMBASSADE DE LA REPUBLIQUE DU MALI AUX ETATS UNIS**

2130 R STREET N.W. WASHINGTON D.C. 20008

TEL: 202 332 22 49 FAX: 202 332 66 03

**DEMANDE DE VISA D'ENTREE AU MALI / MALI VISA APPLICATION FORM**

NOM / LAST NAME: \_\_\_\_\_

SURNAME / PRENOM: \_\_\_\_\_

DATE DE NAISSANCE / DATE OF BIRTH: \_\_\_\_\_

LIEU DE NAISSANCE / PLACE OF BIRTH: \_\_\_\_\_

NATIONALITE / CITIZENSHIP: \_\_\_\_\_

PROFESSION / OCCUPATION: \_\_\_\_\_

LIEU D'EMPLOI / EMPLOYER'S ADDRESS: \_\_\_\_\_

ADRESSE PERMANENTE / PERMANENT ADDRESS: \_\_\_\_\_

ADRESSE AU MALI / ADDRESS IN MALI: \_\_\_\_\_

TELEPHONE / PHONE NUMBER: \_\_\_\_\_

FAX / FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

MOTIF DU VOYAGE / PURPOSE OF THE TRIP: \_\_\_\_\_

DATE D'ENTRÉE / DATE OF ARRIVAL : \_\_\_\_\_

DUREE DU SEJOUR / LENGTH OF STAY: \_\_\_\_\_

TYPE DE VISA/ TYPE OF VISA       3 MONTHS SINGLE ENTRY       3 MONTHS MULTIPLE ENTRIES  
 6 MONTHS MULTIPLE ENTRIES     1 YEAR MULTIPLE ENTRIES       5 YEARS MULTIPLE ENTRIES  
(US Citizens Only / Pending Eligibility)

N° DU PASSEPORT / PASSPORT NO: \_\_\_\_\_

DELIVRE LE / ISSUED ON: \_\_\_\_\_

EXPIRE LE / EXPIRE ON: \_\_\_\_\_

SIGNATURE :

DATE :