



# TRAVEL REGISTRATION FORM VISAS & PASSPORTS 2 GO, INC.

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(please complete one form per traveler)

## TRAVELER INFORMATION:

Traveler's Full Name:	Passport Number:	Destination Country:
Email Address:	Date of Entry:	Date of Departure:

## EMERGENCY CONTACT IN THE UNITED STATES

Please enter Emergency Contact Information. Your Emergency Contact should be someone who is not travelling with you.

First Name:	Middle Name:	Last Name:	
Street Address:	City:	State:	ZIP Code:
Day Phone No:	Email Address:		

Relationship of Emergency Contact to You:

## HOTEL OR COMPANY NAME OR CONTACT PERSON IN THE COUNTRY YOU ARE TRAVELING TO

Name of Hotel, Company, Contact:			
Street Address:	City:	State:	ZIP Code:
Day Phone No:	Email Address:		

## U.S. DEPARTMENT OF STATE'S PRIVACY ACT INFORMATION:

The U.S. Department of State is committed to ensuring that any personal information received by our overseas embassies and consulates pursuant to the registration process, whether in person or otherwise, is safeguarded against unauthorized disclosure. The data that you provided the U.S. Department of State is subject to the provisions of the Privacy Act (5 USC 552a). This means that the U.S. Department of State will not disclose the information you provide us in your registration application to any third parties unless you have given us written authorization to do so, or unless the disclosure is otherwise permitted by the Privacy Act.

AUTHORITY: 22 U.S.C. 2715 and 22 U.S.C. 4802(b).

PURPOSE: To notify U.S. citizens in the event of a disaster, emergency or other crisis, and for evacuation coordination, the information solicited on this form may be made available as a routine use to appropriate agencies whether federal, state, local, or foreign, to assist the Department in the evacuation or provision of emergency service to U.S. citizens, or for law enforcement purposes. The information is also made available to private U.S. citizens, known as wardens, designated by U.S. embassies to assist in communicating with the American community in an emergency.

## AUTHORIZATIONS:

<input type="checkbox"/>	I have read the terms of the U.S. Department of State's Privacy Act Notice.
<input type="checkbox"/>	I authorize Visas & Passports 2 Go, Inc. to register my trip with the U.S. Department of State.
Print Full Name:	Date:
Signature:	

## IMPORTANT INFORMATION:

VP2Go acts only as an agent and accepts no responsibility for any delays, damages, action, inaction or loss of documents/passports by the U.S. Department of State, embassy, or any courier, delivery and postal services. Issuance of a visa or passport is a decision of the country to which application is made or the U.S. Department of State. VP2Go assumes no liability for a country's decision or the U.S. Department of State's decision or for delays encountered in processing an application.