**CENTURY INSURANCE Saipan International 2025**

**SAIPAN, NORTHERN MARIANA ISLANDS**

**AUGUST 12-16, 2025**

**VISA LETTER REQUEST FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **MEMBER ASSOCIATION Country:** |  | **CONTACT NAME In full:** |  |
| **CONTACT Phone number:** |  | **CONTACT Email address:** |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NO** | **FAMILY** **NAME** **(passport)** | **GIVEN** **NAMES** **(passport)** | **GENDER** | **NATIONALITY** | **PASSPORT NUMBER** | **EXPIRY DATE** | **DATE OF BIRTH** | **ROLE (player, coach, etc)** |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |
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| 8 |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |

**Notes:**

**If you are playing the CROWNE PLAZA Northern Marianas Open 2025 as well as this tournament you only need to submit one form**

1. Players and officials requiring a Visa support letter to enter the NMI must complete the above form and return to Event Director as soon as possible.
2. To see list of countries under the United States and NMI Visa Waiver Program and who would only need Electronic System for Travel Authorization (ESTA), visit <https://www.dhs.gov/visa-waiver-program-requirements> or <https://esta-center.com/en/guam/index.html> for more information.
3. The Official invitation letter for your Visa application will be sent to your contact address.
4. Please allow sufficient time for the processing of your application. We recommend applying at least 45 days prior to your planned travel dates.

Please return this form to:

Event Director – Roselyn Monroyo
Email: roselynmonroyo@gmail.com

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