

**Power-of-Attorney – Annexure A**

I

|                     |  |
|---------------------|--|
| Name                |  |
| Date/Place of Birth |  |
| Passport Number     |  |

Herewith authorize Mr/Mrs/Ms

|                       |  |
|-----------------------|--|
| Name                  |  |
| Relation to applicant |  |
| Passport No/other ID  |  |

Or my Agent

|                              |  |
|------------------------------|--|
| Name of company              |  |
| Name of representative       |  |
| Address of the travel agency |  |

- to submit my visa application at VFS Global Services in \_\_\_\_\_
- if applicable, on behalf of my child/children

| Name | Date of birth | Passport no |
|------|---------------|-------------|
|      |               |             |
|      |               |             |
|      |               |             |

\*both parents may enter data and sign on one form

and if applicable

- to make additions and changes on my visa application form
- to receive any communication/information on my behalf
- to make and sign declarations on my behalf
- to collect my passport directly at the respective Visa section or at the Visa Application Centre on my behalf

**Kindly note, that your representative/agent may not sign the visa application on your behalf.**

\_\_\_\_\_  
Signature (of the applicant) & Date