

**AUTHORIZATION FORM IN FAVOUR OF VFS VISA APPLICATION CENTRE**

I, (name of the applicant) \_\_\_\_\_, holder of passport no: \_\_\_\_\_,

Visa applied for: (category of visa) \_\_\_\_\_, authorize the VFS staff:

- To submit my visa application at the Embassy of Spain in New Delhi.
- To receive any communication/information on my behalf.
- To collect the passport on my behalf after the application has been processed.

I also authorize VFS Visa Application Centre to receive and to sign acknowledgement of receipt in my name of any notification, requests, summons, rejection etc from the Embassy of Spain, as well to undertake at the Embassy any other step necessary for the processing of the application.

Date:

Signature of the applicant:

Contact details of the applicant:

**ACKNOWLEDGEMENT, RECEIPT OF PASSPORTS**

Today VFS has withdrawn/ received from the Embassy of Spain in New Delhi the passport(s) belonging to Mr. /Mrs....., with VFS application number.....

Passport number.....

Date:

Name & Signature of VFS Staff

.....

.....

**AUTHORIZATION FORM IN FAVOUR OF VFS VISA APPLICATION CENTRE**

(For minor applicants)

We, (name of the mother) \_\_\_\_\_ holder of passport no: \_\_\_\_\_  
and (name of the father) \_\_\_\_\_, holder of passport no: \_\_\_\_\_, as  
parents of the minor applicant(s)

Name of the minor applicant:  
Date of Birth:  
Passport no:

Name of the minor applicant:  
Date of Birth:  
Passport no:

Name of the minor applicant:  
Date of Birth:  
Passport no:

authorize the VFS staff:

- To submit his/her/their visa application at the Embassy of Spain in New Delhi.
- To receive any communication/information on our behalf.
- To collect the passport on our behalf after the application has been processed.

We also authorize VFS Visa Application Centre to receive and to sign  
acknowledgement of receipt in our name of any notification, requests, summons,  
rejection etc from the Embassy of Spain, as well to undertake at the Embassy any  
other step necessary for the processing of the application.

Signature of the mother:

Signature of the father:

Date:

Contact details of the parents:

**ACKNOWLEDGEMENT, RECEIPT OF PASSPORTS**

Today VFS has withdrawn/ received from the Embassy of Spain in New Delhi the  
passport(s) belonging to Mr. /Mrs....., with VFS application  
number.....

Passport number.....

Date:

Name & Signature of VFS Staff

.....

.....



EMBASSY OF SPAIN IN NEW DELHI  
CONSULATE GENERAL OF SPAIN IN MUMBAI

**DECLARACIÓN JURADA SOBRE LA OBLIGATORIEDAD DE DISPONER  
DE UN SEGURO MÉDICO DE VIAJE**  
**SWORN DECLARATION OF THE OBLIGATION OF PRESENTING A TRAVEL INSURANCE**

Yo, \_\_\_\_\_  
\_\_\_\_\_ con  
número de pasaporte \_\_\_\_\_,  
declaro que conozco la obligación de contar  
con un seguro médico de viaje que cubra,  
durante cada una de mis estancias en el  
espacio Schengen y en la totalidad de los  
Estados que forman parte de ese espacio, los  
gastos médicos y la repatriación asociados a  
un accidente o a una enfermedad repentina,  
de conformidad con el Artículo 15 del Código  
Comunitario de Visados. La cobertura mínima  
será de 30.000€.

En \_\_\_\_\_, a \_\_\_\_\_ de 2013

Firmado

I, \_\_\_\_\_  
\_\_\_\_\_ with  
passport number \_\_\_\_\_,  
declare that I am aware of the obligation to  
have a medical insurance covering any  
medical expenditures and repatriation due to  
any accident or sudden illness, each day of  
each visit to the Schengen Territory and in  
each of the States member of this territory as  
per the Article 15 of the Visa Code. The  
minimum coverage is of 30.000€.

In \_\_\_\_\_, on \_\_\_\_\_ de 2013

Signed

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Nota: Esta declaración debe acompañarse de un seguro médico de viaje que cubra durante todo el tiempo de la primera estancia en el periodo Schengen, los gastos médicos y la repatriación asociados a un accidente o a una enfermedad repentina.

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Note: This declaration is to be submitted along with a medical insurance that covers any medical expenditure, repatriation due to an accident or sudden illness during the complete period of the first visit to the Schengen States.

Embassy of Spain  
12, Prithviraj Road,  
New Delhi- 110011  
Emb.nuevadelhi.vis@maec.es

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222 Jamalal Bajaj Marg  
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Mumbai 400 021  
cog.mumbai.vis@maec.es