

SOUTH AFRICA ZIMBABWE TANZANIA NAMIBIA MOZAMBIQUE ZAMBIA

“TRUE AFRICAN EXPERIENCE”



HUNTER

NAME _____
MIDDLE NAME _____
LAST NAME _____
ADDRESS _____

CELL NO. _____
EMAIL _____
FAX NO. _____
SHIRT SIZE _____

PLEASE ATTACH A COPY OF YOUR PASSPORT AND DL
(HOME ADDRESS)

OBSERVER/S

OBSERVER 1

NAME _____
MIDDLE NAME _____
LAST NAME _____
SHIRT SIZE _____

OBSERVER 2

NAME _____
MIDDLE NAME _____
LAST NAME _____
SHIRT SIZE _____

FLIGHT DETAILS

DATE ARRIVAL _____ TIME _____ FLIGHT NO. _____ AIRPORT _____
DATE DEPART _____ TIME _____ FLIGHT NO. _____ AIRPORT _____

FIREARM/BOW/OTHER INFO

WEAPON 1	WEAPON 2	WEAPON 3	WEAPON 4
_____	_____	_____	_____
_____	_____	_____	_____

DO YOU NEED ASSISTANCE IMPORTING FIREARMS? _____

ALLERGIES/ MEDICAL

PLEASE STATE ANY ALLERGIES/ MEDICAL CONDITIONS THAT WE SHOULD BE AWARE OF BELOW

SPECIAL REQUIREMENTS

FOOD DISLIKES

NOTES

OFFICE USE ONLY

CONCESSION _____
PH _____

DATE START _____
DATE END _____

PACKAGES DETAILS

ANIMAL 1 _____
ANIMAL 2 _____
ANIMAL 3 _____
ANIMAL 4 _____
ANIMAL 5 _____

ANIMAL 6 _____
ANIMAL 7 _____
ANIMAL 8 _____
ANIMAL 9 _____
ANIMAL 10 _____

DAY TOURS

TOUR 1 _____
TOUR 2 _____
TOUR 3 _____
TOUR 4 _____

NOTES
