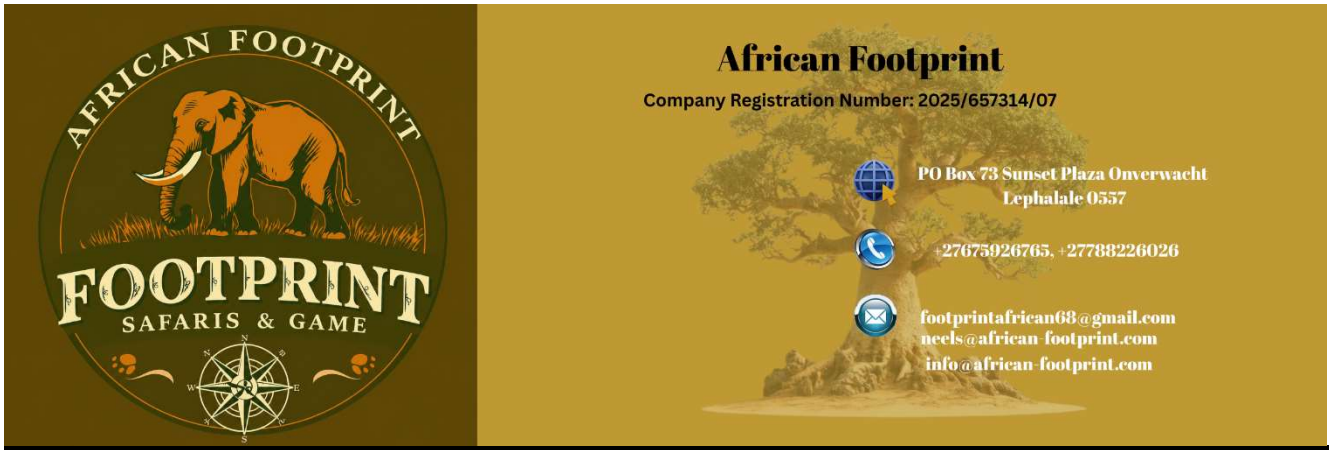


**African Footprint CLIENT SAFARI INFO:**

**NAME AND LAST NAME:**_____

**DATE OF SAFARI:**_____

**DETAILS OF NECT OF KIN: - CONTACT IN CASE OF EMERGENCY**

| |
|---|
| **NAME:** |
| **RELATION:** |
| **PHONE NUMBER:** |
| **E-MAIL ADRESS:** |

**FOOD AND BEVERAGE PEREFERANCE: PLEASE FEEL FREE TO BE SPECIFIC AS WE WANT TO CATER YOUR SPECIFIC NEEDS:**

| |
|---|
| **PLEASE LIST ANY ALLERGIES & FOOD ALLEGERGIES:** |
| **PLEASE LIST ANY FOODS THAT YOU DISLIKE OR WOULD RATHER NOT EAT:** |
| **FOOD PREFERANCES:** |
| **BEVERAGES DURING MEALS:** |
| **BEVERAGES DURING HUNTING:** |
| **ALCOHOLIC BEVERAGES:** |
| **ANY OTHER NOTES:** |

**GENERAL MEDICAL INFO: HEART CONDITIONS, DIABETES, ECT.**

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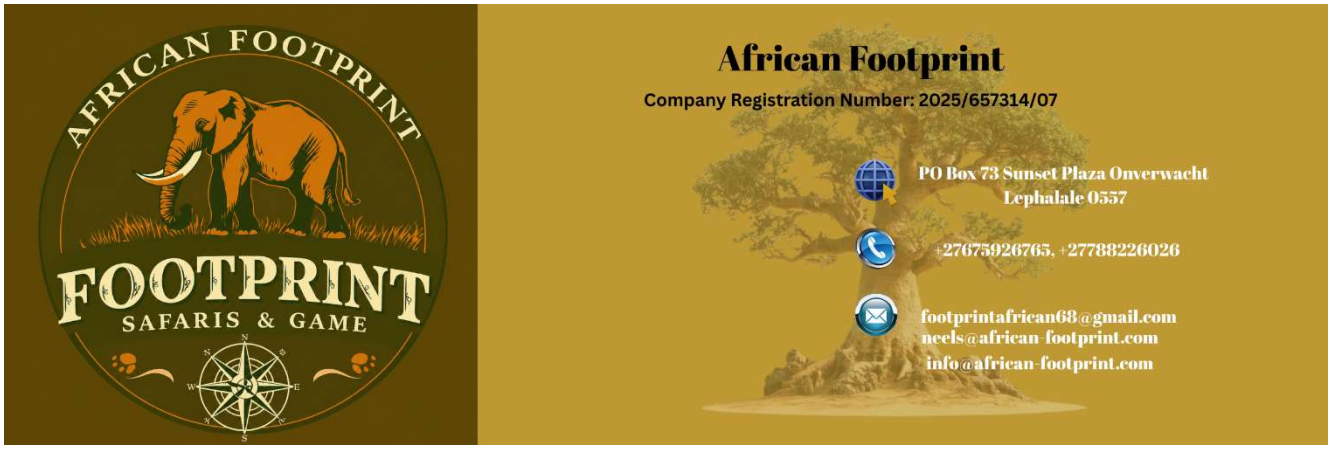
**PLEASE MAKE SURE THAT WE ARE IN POSSESSION OF YOUR SAFARI CONTRACT, IMDEMNITY WAIVER & RIFLE DOCUMENTATION.**

**THANK YOU!!!!**

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