



Trophy Trackings Hunting Safaris
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PERSONAL DETAILS & PREFERENCES

FULL NAME : _____

ADDRESS : _____

CITY : _____ STATE : _____ ZIP : _____

TEL : (HOME) _____ TEL : (WORK) _____

CELL : _____ FAX : _____

E-MAIL ADDRESS : _____

DATE OF HUNT : _____

AGE : _____ DATE OF BIRTH : _____ SHIRT SIZE : _____

ANY ALLERGIES AND/OR MEDICAL CONDITIONS WE SHOULD KNOW :

PREFERRED BEVERAGES : _____

DIETARY RESTRICTIONS : _____

IN CASE OF AN EMERGENCY, CONTACT : NAME : _____

RELATIONSHIP : _____

TEL / CELL : _____

I PLEDGE NOT TO HOLD TROPHY TRACKINGS HUNTING SAFARIS, ITS OWNERS, EMPLOYEES AND / OR SUPPLIERS RESPONSIBLE FOR ANY ACCIDENTS, CLAIMS, LOSSES, DAMAGES OR LIABILITIES, INCLUDING DEATH, DISABILITY, INJURY, LOSSES OR DAMAGES THAT MIGHT OCCUR.

SIGNATURE OF CLIENT

DATE