



STEF SWANEPOEL
OUTFITTER AND PROFESSIONAL HUNTER

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OUTFITTER'S QUESTIONNAIRE

LAST NAME: _____

NAME AS PER PASSPORT: _____

GENDER : M ☐ F ☐

ADDRESS:

PHYSICAL ADDRESS: _____

CONTACT DETAILS:

HOME: _____

BUSINESS: _____

CELL: _____

EMAIL: _____

CITIZENSHIP: _____ DATE OF BIRTH: _____

OCCUPATION: _____

PASSPORT NR: _____ VALID FROM: _____ TO: _____

DONATION BOUGHT AT: _____ DATE BOUGHT: _____ PAID \$: _____

DEPOSIT: _____ DATE PAID: _____

IN AN EMERGENCY, NOTIFY:

NAME: _____ RELATIONSHIP: _____

ADDRESS: _____

PHONE: (HOME) _____ (WORK) _____

CELL: _____ (EMAIL) _____

WOULD YOU LIKE TO PURCHASE A PERSONALIZED NUMZAAN SHIRT ? YES ☐ NO ☐

IF YES, PLEASE INDICATE YOUR SIZE & NAME ON THE SHIRT: _____

WEAPON INFORMATION:

OWN RIFLE: BOW: HANDGUN: BLACK POWDER:

MAKE & CALIBER: _____ SERIAL NUMBER: _____ QTY AMMO: _____

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IF OWN RIFLE, WHO IS HANDLING THE PRE-APPLICATION OF YOUR RIFLE PERMIT? _____

TRAVEL INFORMATION:

ARRIVAL DATE: _____ FLIGHT NR & TIME: _____

SAFARI STARTS: _____

SAFARI ENDS: _____

DEPARTURE DATE: _____ FLIGHT NR & TIME: _____

TROPHIES DESIRED: _____

PREVIOUS SAFARI EXPERIENCE: _____

FOOD & DRINKS PREFERENCES: _____

HEALTH INFORMATION:

HEALTH: _____

GENERAL PHYSICAL CONDITION? _____

ANY PHYSICAL HANDICAPS? _____

ANY ALLERGIES? _____

HEIGHT: _____ WEIGHT: _____

BLOOD TYPE: _____ SMOKER? _____