



SAFARI EXPERTS

Luxury - Boutique - Personalized - Journeys

## Safari Registration Form

**Important:** All information will be held in confidence and will be released only to the appropriate individual.

### Information (Please complete one form for each person travelling)

Full name as it appears on your passport \_\_\_\_\_

Passport # \_\_\_\_\_ Passport Expiration date \_\_\_\_\_

Issue Location \_\_\_\_\_ Nationality \_\_\_\_\_

Date of birth \_\_\_\_\_ Occupation \_\_\_\_\_

Name you go by \_\_\_\_\_

Mailing Address \_\_\_\_\_ Physical Address \_\_\_\_\_

City \_\_\_\_\_ State /Province \_\_\_\_\_ Zip /Postal Code \_\_\_\_\_

Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

### Are You Celebrating Any Special Events During Your Trip?

Yes [ ] No [ ] Event \_\_\_\_\_

### Health, Medical & Dietary Information

Male [ ] Female [ ] Height \_\_\_\_\_ Weight \_\_\_\_\_

YES NO

[ ] [ ] Require a special diet? Please describe \_\_\_\_\_

[ ] [ ] I have an allergy to some foods / drugs? Please list \_\_\_\_\_

[ ] [ ] Do you have any physical considerations that may impact your travel?  
If yes, please elaborate \_\_\_\_\_

### Emergency Contact Information

Please indicate for our records the name and address of a friend or relative not traveling with you whom we could contact in case of an emergency.

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Day phone (incl country code) \_\_\_\_\_ Email \_\_\_\_\_

Home phone (incl country code) \_\_\_\_\_

**Enclosed is my check for \$250 per person as an engagement fee and request Safari Experts L.C. to proceed immediately with the planning of my safari. I/We understand that \$200 per person will be applied to the cost of my safari. In the event of my not travelling, the engagement fee shall be forfeited. I have read and understand the terms and conditions that shall apply, and that payment of my deposit shall constitute agreement to these terms.**

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Tim Lapage** - Independent Safari Consultant

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