# KAMBAKO SAFARIS

## MOZAMBIQUE

## CLIENT INFORMATION SHEET

NAME: _____
(FIRST) (MIDDLE) (LAST)

ADDRESS: _____

_____

**CONTACT DETAILS:** *EMAIL:* _____

*TEL #:* (_____)_____

*FAX #:* (_____)_____

### PASSPORT INFORMATION

Nationality: _____ Passport #: _____

Date of Birth: _____ Place of Birth: _____

Date of Issue: _____ Place of Issue: _____

Valid Until: _____ Occupation: _____

### FIREARMS / AMMUNITION

| MAKE | TYPE | CALIBRE | SERIAL # | Qty. AMMO |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

### ANY SPECIAL REQUIREMENTS – DIETARY OR OTHERWISE

Please scan & email with this form asap & no later than 3 mths prior to your departure date to jumbo@kambakosafaris.com AND cheryl@kambakosafaris.com :

1. a passport photo
2. a copy of your passport page with your particulars
3. firearm licences or customs clearance certificate for the above firearms