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GET TO KNOW YOUR GUEST FORM

Guest full names and surname:			
Passport Number:			
Date of birth:			
Personal Hobbies or interest:			
My favourite colour is...?			
My favourite family activity is...?			
My travel, TOP 3, bucket list:			
My activity, TOP 3, bucket list:			
What I would like to get out of this trip to SA is...?			
Personal YES's (likes)?			
Personal NO's (dislikes)?			
Please provide us with the following information:	Weight:	Hight:	Shoe size: