

SafariKZN Safari Client Questionnaire

What do you wish to experience in your safari/holiday?

Game drives	<input type="checkbox"/>	Guided Tour	<input type="checkbox"/>	Shark Cage Diving	<input type="checkbox"/>	Cultural visits/Historical Sites	<input type="checkbox"/>
Night drives	<input type="checkbox"/>	Birdwatching	<input type="checkbox"/>	Scuba diving/Snorkeling	<input type="checkbox"/>	Special Interest Safaris	<input type="checkbox"/>
Walking safaris	<input type="checkbox"/>	Honeymoon	<input type="checkbox"/>	Fishing	<input type="checkbox"/>	Volunteering	<input type="checkbox"/>
Boat Safaris	<input type="checkbox"/>	Mountains/Hiking	<input type="checkbox"/>	Beach	<input type="checkbox"/>	Battlefields	<input type="checkbox"/>
Self Drive	<input type="checkbox"/>	Horseback safari	<input type="checkbox"/>	Ocean Safari (Turtle/Whales)	<input type="checkbox"/>	Open to suggestions	<input type="checkbox"/>
Astronomy / Sky Gazing	<input type="checkbox"/>						

Any specific animals/birds you are interested in viewing: _____

Duration of trip in days?

3 Days	<input type="checkbox"/>	8 Days	<input type="checkbox"/>	14 Days	<input type="checkbox"/>
4 Days	<input type="checkbox"/>	9 Days	<input type="checkbox"/>	16 Days	<input type="checkbox"/>
5 Days	<input type="checkbox"/>	10 Days	<input type="checkbox"/>	18 Days	<input type="checkbox"/>
6 Days	<input type="checkbox"/>	11 Days	<input type="checkbox"/>	20+ Days	<input type="checkbox"/>
7 Days	<input type="checkbox"/>	12 Days	<input type="checkbox"/>	Other	<input type="checkbox"/>

How many adults in your party?

1 2 3 4 5 6 7 8 9 10 Other _____

How many children in your party?

1 2 3 4 5 6 7 8 9 10 Other _____

What type of accommodations do you prefer?

Lodges	<input type="checkbox"/>	Tented camps (Fixed)	<input type="checkbox"/>
Self Catering	<input type="checkbox"/>	Hotel	<input type="checkbox"/>
Bed & Breakfast	<input type="checkbox"/>	Open to suggestions	<input type="checkbox"/>

Preferred Month or dates of travel?

January	<input type="checkbox"/>	May	<input type="checkbox"/>	September	<input type="checkbox"/>
February	<input type="checkbox"/>	June	<input type="checkbox"/>	October	<input type="checkbox"/>
March	<input type="checkbox"/>	July	<input type="checkbox"/>	November	<input type="checkbox"/>
April	<input type="checkbox"/>	August	<input type="checkbox"/>	December	<input type="checkbox"/>

or Specific Dates

from _____ (Day) _____ (Month) _____ (Year)

to _____ (Day) _____ (Month) _____ (Year)