

New Zealand Procedures for Non-Governmental Visitors to Antarctica

Appendix 3 Advance Notification form

Tourist and non-Governmental Activities in the Antarctic

This information is requested in compliance with Antarctic Treaty Recommendation XVIII-1 and Resolution XIX-3.

Please email this form to env@mfat.govt.nz.

A: Tour / Expedition Organizer

Company name:

Contact person:

Company address:

National registration of Company:

International phone:

Total number of Expedition [Staff](#)¹:

International fax:

B: Details of transport and equipment to be used for the Tour / Expedition

(Complete these panels only once if all Tours / Expeditions planned do not vary in their use of transport or equipment: where these vary, complete the panel for every Tour or Expedition)

B.1 Vessel / aircraft used for transport to / from Antarctica

Vessel / aircraft registered name:

Vessel / aircraft type:

National registration:

Vessel / aircraft passenger carrying capacity:

Vessel ice rating (if applicable):

Ship Yacht Aircraft

Vessel / aircraft fuel capacity

Vessel / aircraft fuel type:

Intended use of vessel / aircraft

Vessel / aircraft call sign:

inmarsat number/fax:

Radio frequency:

Captains' / commanders' name(s):

Total number of [crew²](#):

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B.2 Equipment to be used within Antarctica

Number and types of aircraft to be used:			Number and types of other vessels or vehicles (e.g. small boats, snowmobiles) to be used:		
Number	Type	Use	Number	Type	Use

1 Staff: Expedition personnel, guides, lecturers, small boat drivers (exclude crew serving these functions).

2 Crew: Vessel's captain and officers, helicopter pilots, crew and hotel / catering staff (exclude Staff, Passengers and Observers).

C: Contingency planning

Type and amount of insurance cover, including name of insurer(s):

Arrangements for self-sufficiency and contingency plans, including for medical evacuations and search and rescue in the event of an emergency:

D: Expedition Details (complete one of these panels for every separate cruise / expedition you are organizing)

Planned port of embarkation:

Planned date of embarkation:

Planned port of disembarkation:

Planned date of disembarkation:

Planned Cruise/Flight number or Voyage Name:

Estimated number of [Passengers¹](#) to be carried:

Activities to be undertaken and purpose:

Intended itinerary — places to be visited, giving estimated dates:

¹ Passengers: Members of the Expedition not Staff or Crew, excluding Observers / National Representatives.

Signature: Tour / Expedition Organizer

Date: