

# Batch ETA System Registration Form A1

## **Carrier - Primary Contact(s)**

**Cruise Line** 

Use this form to register (or update) a Primary Contact(s) for use of Immigration New Zealand's (INZs) Batch ETA System to request Crew Electronic Travel Authorities (Crew ETAs). In order to use the Batch ETA System, there must be least one Primary Contact at all times.

Cargo vessel owner

NOTE: Carrier representatives such as ship management companies and manning/crewing agents must first be nominated by one of the above organisations

#### **Carrier type:**

Airline

| Primary Contact(s) | Contact Details  |               |              |
|--------------------|------------------|---------------|--------------|
| Full name          | Business Address | Email Address | Phone Number |
|                    |                  |               |              |
|                    |                  |               |              |

#### **Important information for Primary Contacts**

Primary Contacts are the person(s) who INZ will contact to discuss matters relating to the use of the Batch ETA System by your organisation or representatives. It is important to ensure that Primary Contacts are updated if they change. Important responsibilities of Primary Contacts include:

- Ensuring only Authorised Users of the Batch ETA System are able to access it;
- Advising INZ of any changes to their Authorised Users (including persons who no longer require access);
- Ensuring INZ is advised of any crew who hold a valid crew ETA but who are no longer employed or working as a crew member;
- Advising INZ of any changes to nominated Carrier Representatives such as manning/crewing agents.

Further information about the responsibilities when using the Batch ETA System are set out in the Terms of Use.

### Authorisation of Primary Contact(s) and acceptance of Terms of Use

By signing below, I understand and accept the Terms of Use for the Batch ETA System.

Company name of Airline/Cruise Line/Cargo Vessel owner

Name of Primary Contact (one only)

Signature of Primary Contact (one only)

Date

To sign this form electronically, please open this form in Adobe Acrobat Reader.

Once completed, this form should be returned to BatchETA@mbie.govt.nz

