

Lust 4 Rust TRIP BOOKING FORM DETAILS

Date of trip being booked:	Destination of trip:	
NAME OF DIVER: _	DOB:	
Full Contact Address:		
Email:		
Contact numbers:	(H)	
Signature:	(by signing this form you agree to all the booking conditions)	
Next of Kin of diver:	(b) signing this form you agree to an and seeming container,	
Full Contact Address:		
Email:		
Contact Numbers)please put fui	all international codes: (H)(Mob)	
DAN INSURANCE #	(exp)	
TYPE OF POLICY:		
HIGHEST CERTIFICATIO	N: (hours experience at this level)	
CERT CARD #:	Training Agency:	
NOTE: Please indicate your high with highest level of qualificatio	hest level of certification and include a photocopy or scan of the front and back of your certification card. Rebreather CCR car on would be appreciated	rds
TOTAL DIVING exp in HC	DURS:	
Please Select:	Type of CCR:	
	Type of CCR: Sorb needed in kg:	
Tmx you require:	Deco Mix you require:	
Additional Gear needs:		
Please note that hireage costs wii	ll be incurred unless previously agreed. If you are completely self sufficient then just put NO gear needed.!	

LIABILITY RELEASE AND EXPRESS ASSUMPTIONS OF RISK FOR DIVING

THIS IS A RELEASE OF YOUR RIGHTS TO SUE PETE MESLEY, AND/OR ANY OF THEIR EMPLOYEES, AGENTS AND ASSIGNS, AND ANY ENTITY FOR PERSONAL INJURIES OR WRONGFUL DEATH THAT MAY OCCUR DURING YOUR FORTHCOMING DIVE ACTIVITIES AS A RESULT OF THE INHERENT RISKS ASSOCIATED WITH SCUBA (OR CCR) DIVING/SNORKELING AND THE UNIQUE ENVIRONMENT.

Please place your initials next to each of the following sections:

 I acknowledge that I am a certified sci 	a Diver or CCR diver. M	ly Highest certification level is
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	agency name	card #	date certified
			on and include a photocopy of the front and back of your th highest level of qualification would be appreciated
2. I have _	hours of	diving experience on the above	e certification level. Total mount of hours
of diving i	S		

- 3. I carry adequate Medical/Diving Insurance (where applicable) to handle any medical problems I may develop in connection with my upcoming dives.
- 4. I understand that diving with compressed air or mixed gases (or on a Rebreather) involves certain inherent risks, including decompression sickness, embolism, Oxygen Toxicity, or other hyperbaric injuries. I further understand that even though I follow all of the appropriate dive practices, there is still some risk of sustaining these injuries, and I expressly assume the risk and responsibility of said injuries.
- 5. I certify that I am in good physical and mental health and any health concerns have been addressed by visiting a diving medical professional rendering me fit to dive. If you answer YES to any of the questions in the attached RSTC Medical form you will be required to undergoe a divers medical. Details of that form are to be attached.
- 6. If I suspect that I have DCS I will immediately inform the dive supervisor or tour leader.
- 7. I understand that I will always dive safe, not put myself or others at risk. If I do put myself or other people at risk I will not be able to continue diving with this group.
- 8. I understand that scuba (and CCR) diving are physically strenuous activities and that I will be exerting myself during my diving activities. If I am injured as a result of a heart attack, panic attack, hyperventilation or other injury/illness related to diving, I expressly assume the risk of all said injuries.
- 9. I understand that safe practices for scuba (or CCR) diving include but are not limited to the following:
 - I will **not** scuba (or CCR) dive while under the influence of alcohol, drugs and/or any other controlled substance.
 - b) I will **not** dive alone or with a person whom I have not thoroughly discussed the dive plan. Each of us will review one another's diving equipment and emergency procedures before each dive.
 - c) I will dive with properly maintained and serviced regulators, Ensuring that **ALL OXYGEN CLEANING** is done within 12 months of the trip dates on ALL regulators with anything higher than EAN40 (or as stated by the manufacturer, and Serviced by a Proper service agent. buoyancy control device that has a power inflation system, a depth gauge, a submersible pressure gauge and a timing device.
 - d) I will adjust weights to maintain neutral buoyancy with no air in my buoyancy control device at the surface of the water and position weights to keep the quick-release buckle centered and accessible at all times.
 - e) I will **not** dive in conditions I which I do not feel comfortable or that I believe exceed my physical abilities, overhead environments and other dangerous environments.
 - f) I will surface with at least 30-50 bar in my air tank (DIL) and no less than 30 bar of O2 and will not stay underwater until my gas supply has exhausted.
 - g) I am proficient with the use of a dive table and/or a dive computer and (or) can plan extended decompression dives if appropriately trained.
 - h) I understand that the boat captain and dive supervisor (s) will make the final selection of dive location, based upon the weather conditions, and I will abide by their selection.
 - i) (For CCR divers only) I will **not** exceed the single maximum CNS dose or daily dose both with

- CNS or OTU and if levels exceed 100% you will be required to stand down for 12 hours (For CCR divers only) I will **not** dive if my rebreather is faulty or shows (but not limited to) cell failure, Low battery, controller problems before the dive and if I have any failures I will end the dive immediately.
- 10. I state that I am at least twenty-one (21) years of age and legally competent to sign this Liability Release and Express Assumption of Risk.
- 11. I understand that this Liability Release and Express Assumption of Risk constitutes a contract between myself and the released parties listed above and that I have signed this document of my own free will

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND EXPRESS ASSUMPTION OF RISK BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF, AND HEIRS AND MY ESTATE.

Printed name of diver:	DOB:	
Signature of diver:	Date	



closed or open spaces)?

vent them?

hv





MEDICAL STATEMENT

Participant Record (Confidential Information)

Please read carefully before signing.

This is a statement in which you are informed of some potential risks
involved in scuba diving and of the conduct required of you during the
scuba training program. Your signature on this statement is required for
you to participate in the scuba training program offered

υу	Instructor	current cold
	located in the	under the infl
	Facility	asthma, hear ing medication
city of_	, state/province of	the instructor
enroll i this St	Read this statement prior to signing it. You must complete this al Statement, which includes the medical questionnaire section, to in the scuba training program. If you are a minor, you must have atement signed by a parent or guardian. Diving is an exciting and demanding activity. When performed tly, applying correct techniques, it is relatively safe. When	important saf diving. Impro must be thore qualified instr If you Statement or instructor bef
	ers Medical Questionnaire	
	e Participant:	
ined by respons respons	rpose of this Medical Questionnaire is to find out if you should be examyour doctor before participating in recreational diver training. A positive se to a question does not necessarily disqualify you from diving. A positive se means that there is a preexisting condition that may affect your safety iving and you must seek the advice of your physician prior to engaging in tivities.	Please answer with a YES or you, we must r scuba diving. Y Guidelines for physician.
	Could you be pregnant, or are you attempting to become pregnant?	Dysen
	Are you presently taking prescription medications? (with the exception of birth control or anti-malarial)	Any di Inabilit
	Are you over 45 years of age and can answer YES to one or more of the	within
	following? • currently smoke a pipe, cigars or cigarettes	Head i
	have a high cholesterol level	Recur
	have a family history of heart attack or stroke	Back of
	 are currently receiving medical care high blood pressure 	Diabet
	diabetes mellitus, even if controlled by diet alone	Back,
Have	you ever had or do you currently have	High b
	Asthma, or wheezing with breathing, or wheezing with exercise?	Heart
	Frequent or severe attacks of hayfever or allergy?	Heart
	Frequent colds, sinusitis or bronchitis?	Angina
	Any form of lung disease?	Sinus
	Pneumothorax (collapsed lung)?	Ear dis
	Other chest disease or chest surgery?	Recuri
	Behavioral health, mental or psychological problems (Panic attack, fear of	1100011

Epilepsy, seizures, convulsions or take medications to prevent them? Recurring complicated migraine headaches or take medications to pre-

Frequent or severe suffering from motion sickness (seasick, carsick,

Blackouts or fainting (full/partial loss of consciousness)?

established safety procedures are not followed, however, there are increased risks.

To scuba dive safely, you should not be extremely overweight or out of condition. Diving can be strenuous under certain conditions. Your respiratory and circulatory systems must be in good health. All body air spaces must be normal and healthy. A person with coronary disease, a current cold or congestion, epilepsy, a severe medical problem or who is under the influence of alcohol or drugs should not dive. If you have asthma, heart disease, other chronic medical conditions or you are taking medications on a regular basis, you should consult your doctor and the instructor before participating in this program, and on a regular basis thereafter upon completion. You will also learn from the instructor the important safety rules regarding breathing and equalization while scuba diving. Improper use of scuba equipment can result in serious injury. You must be thoroughly instructed in its use under direct supervision of a qualified instructor to use it safely.

If you have any additional questions regarding this Medical Statement or the Medical Questionnaire section, review them with your instructor before signing.

Please answer the following questions on your past or present medical history with a **YES** or **NO**. If you are not sure, answer **YES**. If any of these items apply to you, we must request that you consult with a physician prior to participating in scuba diving. Your instructor will supply you with an RSTC Medical Statement and Guidelines for Recreational Scuba Diver's Physical Examination to take to your physician.

physici	an.
	Dysentery or dehydration requiring medical intervention?
	Any dive accidents or decompression sickness?
	Inability to perform moderate exercise (example: walk 1.6 km/one mile within 12 mins.)?
	Head injury with loss of consciousness in the past five years?
	Recurrent back problems?
	Back or spinal surgery?
	Diabetes?
	Back, arm or leg problems following surgery, injury or fracture?
	High blood pressure or take medicine to control blood pressure?
	Heart disease?
	Heart attack?
	Angina, heart surgery or blood vessel surgery?
	Sinus surgery?
	Ear disease or surgery, hearing loss or problems with balance?
	Recurrent ear problems?
	Bleeding or other blood disorders?
	Hernia?
	Ulcers or ulcer surgery ?
	A colostomy or ileostomy?
	Recreational drug use or treatment for, or alcoholism in the past five

The information I have provided about my medical history is accurate to the best of my knowledge. I agree to accept responsibility for omissions regarding my failure to disclose any existing or past health condition.

Signature Date Signature of Parent or Guardian Date

years?

STUDENT

Please print legibly. Name Mailing Address _____ State/Province/Region ____ City_ Country ___ Zip/Postal Code Home Phone (Business Phone (FAX Email _ Name and address of your family physician Clinic/Hospital Physician _____ Address Date of last physical examination _____ Name of examiner_____ Clinic/Hospital____ Address _ Email ____ Phone (Were you ever required to have a physical for diving? ☐ Yes ☐ No If so, when?_____ **PHYSICIAN** This person applying for training or is presently certified to engage in scuba (self-contained underwater breathing apparatus) diving. Your opinion of the applicant's medical fitness for scuba diving is requested. There are guidelines attached for your information and reference. **Physician's Impression** ☐ I find no medical conditions that I consider incompatible with diving. ☐ I am unable to recommend this individual for diving. Remarks ___ Date ____ Physician's Signature or Legal Representative of Medical Practitioner Physician_____ Clinic/Hospital_____ Address _____ Email _____ Phone (





Payment options for 2025.

We have just made international payments a whole lot easier. Here at Dive TEC & Lust4Rust Dive Excursions ltd. we have a commercial business account with WISE.

<u>WISE.com</u> formally TransferWise is a UK based financial technology company that provides international money transfers and a multi currency account founded in 2011. It offers a service that aims to be cheaper and faster than traditional banks by using real mid market exchange rates with a transparent fee structure, the company provides services for both personal and has an app to send and track money transfers.

What is it a global money transfer Service and account management platform

Key features:

- International transfers: enable sending money across borders with what it claims are more favourable exchange rates and lower fees than many banks.
- Multi-currency account: allows uses and money in multiple currencies.
- Debit card: An optional linked debit card is available for spending in different countries
- Business accounts: services for businesses to make and receive payments and various currencies.
- **Transparent pricing:** Uses the real mid market exchange rate and charges a transparent upfront fee
- How it works: WISE uses local bank accounts in different countries to transfer money. Minimising the costs associated with international transfers. Users can manage everything through one mobile app.

IF you are not a member of WISE then here is a link to become a member wise.com/invite/ihpc/petem38

QR CODES MADE EASY

Once you have an account then transferring monies is extremely easy. We have set up QR code payments so all you need to do is just scan the QR code and the rest is done for you. You can track your payment and being a business account its all verified in triplicate annually.



Bank transfer details for Peter Mesley t/a Dive TEC

Our contact details

THIS IS A US DOLLAR ACCOUNT

Account name: Dive TEC & Lust4Rust Dive Excursions ltd.

Bank: BNZ (Bank of New Zealand)

Branch: Wellington, NZ,

Bank Address: 60 Waterloo Quay, Pipitea, Wellington, New Zealand, 6011

Branch number: 02 1000
Account number: 643908 0000
Swift code: BKNZNZ22

IBAN: NILL – (NZ has not adopted this)

Beneficiary:

Name: Dive TEC & Lust4Rust Dive Excursions ltd. (Pete Mesley)

Address: 99 St Annes Crescent, Wattle Downs, Auckland New Zealand, 2103

 Contact #:
 00 64 272782250

 Email:
 pete@lust4rust.co

 Web:
 www.lust4rust.co

VERY IMPORTANT

Please can you ensure that you inform your bank NOT TO AUTOCONVERT.

ALSO Please ask your bank to write down in the reference section DO NOT AUTOCONVERT The funds will be immediately declined if the bank (or intermediary bank) converts to NZ dollars.

Banks assume that if monies are being sent to NZ they automatically convert it to NZ dollars. Please inform bank not to autoconvert.

Web: www.lust4rust.co, Email: pete@lust4rust.co, Mob: 00 64 27 2782250



Booking Conditions (Nov 2018)

1. THE CONTRACT

The person who signs the booking form (or for digital copies, fills out their name) does so on behalf of all the individuals included on it. such that all are bound by the booking conditions. They accept these conditions on behalf of himself or herself and all other named persons on the Booking Form and represents that he or she is authorized to accept these conditions on behalf of such others. All persons named on the Booking Form, or if only one person is named, are hereafter referred to as "you". All tours and activities described in our marketing materials and tour itineraries will hereafter be referred to All bookings are made with Pete Mesley's "Lust for Rust and Shock&Awe Big Animal Diving", hereafter referred to as the "company", "we" or "us". No variation of these conditions may be made unless this is done in writing by a director of the company

2. PAYMENTS

A non-refundable deposit of \$500us of your land arrangements is required and should accompany the completed booking form. For Liveaboard charters please supply the appropriate deposit which will be specified (Normally \$1500us) We will confirm our acceptance of your booking via email, and it is at the time we send out this confirmation that a contract comes into existence between us. The balance of the tour price is due 3 months prior to your departure date for land based trips and 6 months for Liveaboard trips. Should this final payment fail to reach us by the date specified, we reserve the right to treat the booking as cancelled. If a booking is made less than the specified full payment dates, then the full amount is needed on

3. CANCELLATIONS

Any cancellation by you must be made in writing (via email is fine) and is effective from the date of physical receipt by us. The date on which the letter is received by us or our agents will determine the cancellation charges applicable. The cancellation charges are based on whether it is a liveaboard or Land based operation.

Liveaboard:

- Than 6 Months Loss of Deposit < 6 months before trip leaving - Loss of 100% trip costs
- Land based operations:
- > Than 3 months Loss of Deposit

< Than 3 months - Loss of 100% trip costs
Please note that it is at the sole discretion of the owner to enforce these rules. It is best to communicate as soon as you can in order to make the best plan for a positive outcome of your trip.

If we have to cancel your tour before the date of departure, you will have the choice of taking an alternative tour (and where this is of a lower price we will refund the difference) or withdrawing from the contract and accepting a full refund.

In the unlikely event that we become unable to provide a significant proportion of the services you have booked after you depart, we will make alternative arrangements for you at no extra charge, or, if this is impossible, or you do not accept these alternative arrangements for a good reason, we will provide you with transport back to your point of departure and a pro rata refund for the cost of the remainder of your

4. TRIP PRICES

Prices quoted by us are based on exchange rates and costs applicable at the time of quoting, but are not fixed until your booking is confirmed by us. Surcharges may be imposed to cover unforeseen cost increases, or the exchange rates applied to the particular tour. If this means paying a surcharge of more than 10% of the tour price you will be entitled to cancel your tour with a full refund of all monies paid to us except for any premium paid for insurance and amendment charges. Should you decide to cancel because of this, you must exercise your right to do so within 10 days of the date of the invoice

5. TRIP CHANGES BY US

If we have to alter your tour before departure, any change will be either major or minor. Where a change is a minor change, we will if practicable, advise you before departure, but we are not obliged to do so or to pay you compensation. A minor change is any change apart from a major change as defined below. When a change is a major change (and a major change is an alteration to your outward or return flight time by more than 12 hours), we will advise you as soon as reasonably possible. You will then have the choice of accepting the change, taking an alternative tour (and where this is of a lower price we will refund the difference), or withdrawing from the contract and accepting a full refund of all monies paid.

We reserve the right to change any published prices, service or other particulars at any time before we enter into contract with you. If there is any change, we will notify you before we enter into such contract.

6. SPECIAL REQUESTS

If you have special requests, you should inform us of such requests prior to departure. We will advise the relevant supplier of your requirements, but we cannot guarantee that such requests will be met. Furthermore, we have no liability to you if such requests are not met.

7. ITINERARIES

Dive T.E.C. & Pete Meslev's "Lust for Rust and Shock&Awe Big Animal Diving" s not an ordinary travel operator. The type of travel we offer requires flexibility and must allow for alternatives. The outline itinerary as given for each tour must therefore be taken as an indication of what each trip may accomplish, and not as a contractual obligation on the part of the company. The final decision on the itinerary and conduct of any tour will be taken by us in the interests of the group/or clients as a whole. It is understood that the route schedules, itineraries, amenities and mode of transport may be subject to alteration without prior notice due to local circumstances or events which may include sickness or medical breakdown, flight cancellations, strikes, climate and other unpredictable or

8. RISK

At all times the decision of our tour leader or representative will be final on all matters likely to endanger the safety and well being of the tour. You must at all times strictly comply with all laws, customs, foreign exchange and drug regulations. Should you fail to do so then you may be ordered to leave the tour without recourse to any refund and without any legal claim against the company.

9. TRAVEL INSURANCE.

It is essential that all passengers are covered by insurance before setting out on holiday. This insurance must cover personal accident. medical expenses, loss of effects, repatriation costs and all other expenses which might arise as a result of loss, damage, injury, delay or inconvenience. When obtaining travel insurance from a source other than us you must ensure that the insurer is aware of the type of travel to be undertaken.

ALSO it is MANDATORY that you have DAN master plan insurance (or equivalent) The places we dive are isolated and medical attention is sparse.

10. DISCHARGE OF LIABILITY

You acknowledge that the nature of travel and activities undertaken while traveling is adventurous and that as such tours and activities undertaken may involve a significant amount of personal risk. These include injury, disease, loss or damage to property, inconvenience and discomfort. You further acknowledge that you are fully aware of the risks of injury associated with your participation in these various activities and agree to voluntarily assume such risk of injury. It is a fundamental condition of this contract between us and you that to the extent permitted by law you discharge us (including but not limited to our directors, employees, contractors, suppliers and agents) from any liability for any damage, death or injury to person or property whatsoever arising out of or incidental to your tour, whether or not such damage or personal injury is caused or contributed to by us. You also agree to make no claim against us arising out of the tour and further agree that no third party may make a claim through you or on

You will also be required to agree to and sign our diving Liability

11. DCS OR INCIDENTS

If in the event you need treatment for diving related (or non diving related) accidents and cannot dive anymore on the trip, we will do everything in our power to assist you. With regards to trip fees - no refunds will be given. And any costs incurred during the trip will need to be settled

12. COMPLAINTS

If you have a complaint whilst on your tour you must inform us and any relevant supplier immediately. Matters can be most easily sorted out for you on the spot whilst you are on your tour. We must further request that you make the complaint known to us in detail in writing within 28 days of your tour's scheduled completion and we will do our best to reach a settlement with you

13. TRAVEL DOCUMENTS

You must be in possession of a valid passport (no less than 6 months expiry at time of return home), visas, permits and certificates as may be required for the tour. It is your sole responsibility to make sure that you have all necessary visas, health requirements for your entire journey, including transit visas where required. We do not accept responsibility for changes in regulations for visas or any particular requirements for visas and will not be held responsible for your failure to obtain the necessary visas. Any information and advice given by us on visas, vaccinations, climate, clothing, baggage, etc. is given in good faith.

14. EXPERIENCE, LICENCES AND CERTIFICATIONS

Certain activities require a minimum level of experience in order to participate and we expect you to be honest with us in assessing your level of fitness and abilities. Where applicable we will advise you of these requirements in good faith. You accept full responsibility for ensuring you have the relevant experience, licenses and certifications required to participate in these activities and carry documents to that effect. You also agree to not hold us responsible for refusal to carry by us, our agents or suppliers due to your lack of documentary evidence or insufficient experience, licenses or certification.

15. EQUIPMENT AGREEMENT

You agree to reimburse us or our suppliers for any of equipment lost or damaged whilst in your care.

16. MEDICAL STATEMENT

By agreeing to these booking conditions you confirm that you are in good health for the activities which you are undertaking and have advised fully any medical history of heart or lung disorders, asthm or epilepsy, or insulin or drug dependency. You agree that you will not participate in activities if you are feeling unwell or undertake any diving activities if you have a chest cold or respiratory congestion while on the tour. You further understand that if you have any medical condition contrary to these requirements that you must produce a diving medical certificate completed by a diving medical

17. WITHDRAWL OF SERVICES

We reserve the right to withdraw services and expel from any tour any person who is causing risk to themselves or the environment. In the event that this occurs, you agree that you will not be entitled to a refund of any sort and that you will be fully responsible for your travel arrangements from the point of expulsion

18. LEGAL JURISTICTION

By signing or accepting the trip enquiry form you are agreeing to accept all the above conditions, and we agree to operate your tour in the way stated by us. Your contract with us and any matters arising from it shall be exclusively subject to New Zealand law and to the exclusive jurisdiction of the Courts of New Zealand.