

Date Received: \_\_\_/\_\_\_/\_\_\_  
Entered: \_\_\_/\_\_\_/\_\_\_  
By whom: \_\_\_\_\_.

NgaiTakoto Membership ID:

**Personal Details:**

Mr  Mrs  Miss  Ms  (please indicate)

First Names:
Last Name:
Occupation:
Spouse's Full Name:

Home Address:	
Suburb:	City/State/Territory:
Country:	Postal Code:
Phone:	Mobile:
Email Address:	

D.O.B \_\_\_/\_\_\_/\_\_\_ Male  Female

**Details of Children: (please provide any additional children on a separate page)**

Full Name:	Membership ID
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D.O.B \_\_\_/\_\_\_/\_\_\_ Male  Female

Full Name:	Membership ID
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D.O.B \_\_\_/\_\_\_/\_\_\_ Male  Female

Full Name:	Membership ID
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D.O.B \_\_\_/\_\_\_/\_\_\_ Male  Female

Full Name:	Membership ID
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D.O.B \_\_\_/\_\_\_/\_\_\_ Male  Female

Please indicate which of the following apply to you:

- I am a direct descendant of a NgaiTakoto Tupuna.
- I am adopted/Whangai into a NgaiTakoto whanau.
- I am married to a NgaiTakoto descendant.

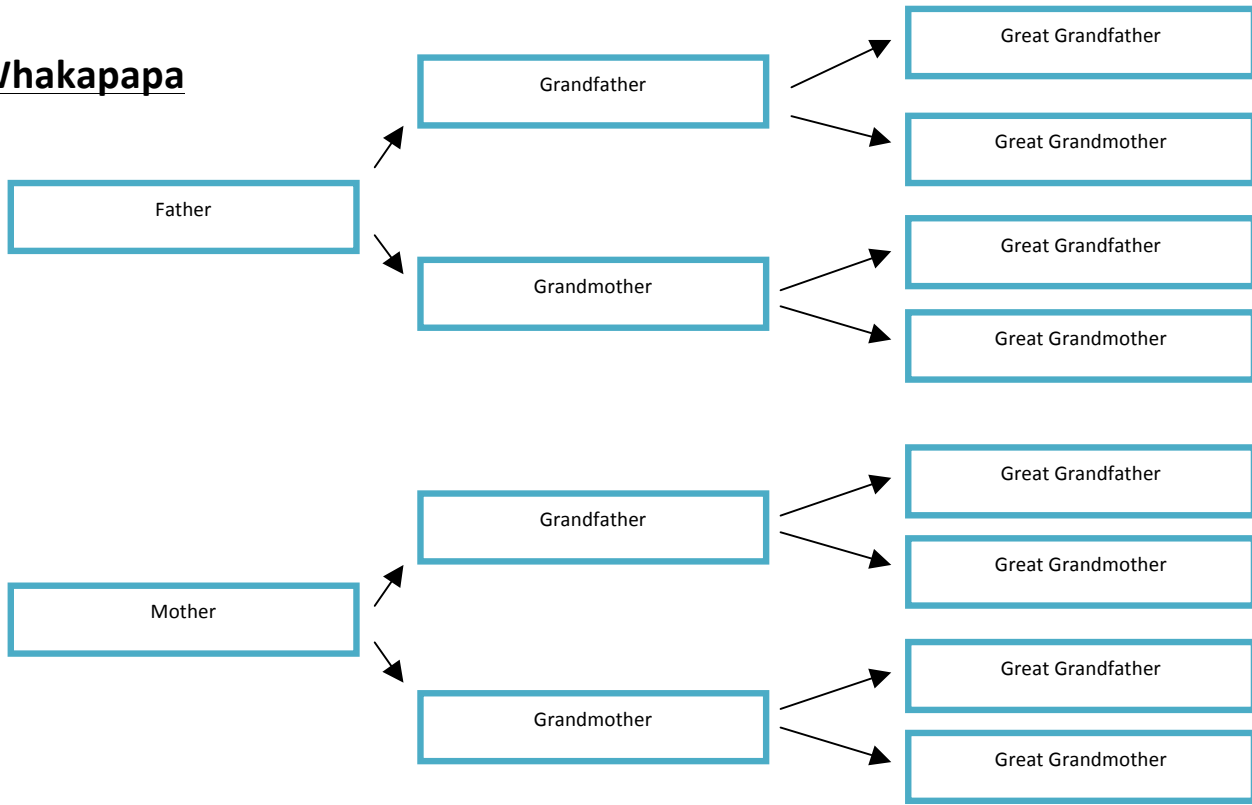
**WHO CAN REGISTER:**

- Direct descendants of NgaiTakoto Tupuna.
- A spouse, widow/widower of a NgaiTakoto descendant.
- Any NgaiTakoto descendant over the age of 16 can register themselves.

**WHY REGISTER**

- To be notified of important issues and decisions affecting NgaiTakoto Iwi
- To receive information on any benefits you may be entitled to.
- To have your say on Marae / Iwi matters if you are over the age of 16.

# Whakapapa



**Marae Affiliations:** Please indicate which Marae you affiliate to and which of these do you consider to be your Primary Marae. A Primary Marae needs to be indicated in order for voting purposes.

<b>WAIMANONI</b> <input type="checkbox"/>	<b>MAHIMARU</b> <input type="checkbox"/>	<b>TE PAA A PARORE</b> <input type="checkbox"/>	<b>WHAREMARU O KAIMAUMAU</b> <input type="checkbox"/>
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<b>Primary Marae:</b>	<b>Hapu:</b> <i>(if known)</i>
<b>Secondary Marae:</b>	<b>Hapu:</b> <i>(if known)</i>

**Privacy Notice:**

Please indicate if you wish to receive information relating to general meetings and postal ballot papers so that you may vote on elections, constitutional amendments, conversation or disposal of settlement returns. Being on the NgaiTakoto Marae register is very important because it is our main contact link with you and gives you a direct say in decisions that affect you, your whanau and your Marae.

Yes  No

**Declaration:**

I hereby declare that the information in this application is true and correct to the best of my knowledge

Agree  Disagree

I understand that the information I provide will be used solely for the purpose of NgaiTakoto Iwi Authority. Te Runanga o NgaiTakoto / Marae will deal with this personal information in accordance with the provisions of the Privacy Act 1993 and the privacy principle stated therein.

Agree  Disagree

I will contact Te Runanga o NgaiTakoto or my respective Marae should my address or details change.

Agree  Disagree

**Applicant's Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Office use only:**

Signed by Te Runanga o NgaiTakoto Staff: \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Verified: By whom: \_\_\_\_\_ Signature: \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_