



Ngāti Kahungunu Membership Registration Form

**E ngā mana, e ngā reo, e ngā raurangatira mā,
Ngā tukemata nui o Kahungunu, Tihei Mauri ora!**

This registration form is to help the Ngāti Kahungunu compile a register of the descendants of Kahungunu, and to identify other Maori people who customarily reside within the Ngāti Kahungunu rohe.

Why Register?

- To participate in Iwi elections as a candidate or voter (must be 18 years or older)
- To be involved in shaping Iwi direction.
- To access beneficiary entitlements such as sponsorship, scholarship, and other assistance the Board may determine.
- To assist the Iwi in communicating with you.
- To build the Iwi whakapapa database.

Membership classes

- As a Maori you are eligible to be registered in the following categories. Please tick the category of membership you are seeking.
 - Tangata Whenua Member** - where you whakapapa to a Hapu/Marae in Ngāti Kahungunu.
 - Ngā Mātā Waka Member** - where you are of another Iwi but reside in the Ngāti Kahungunu rohe.

Privacy of information

- The Information supplied is confidential within the terms of the Privacy Act 1993, and for the lawful use by the Boards of Ngāti Kahungunu Iwi Incorporated and the respective Taiwhenua.
- A person may only access their own personal information.

For more info

- Contact Ngāti Kahungunu Iwi Incorporated office, phone (06) 8762718 or 0800 524 864 if outside the Hawke's Bay calling area. Email pouroki@kahungunu.iwi.nz. 509 Orchard Road, P.O. Box 2406 HASTINGS. Fax (06) 876 4807.

Office Use Only

Date Received:

Date Verified:

Date Loaded:

Your Whakapapa

Please complete this chart showing your Ngāti Kahungunu Whakapapa.

Your Details

Firstname
 Surname
 Gender Male / Female Please circle one.
 Birth Place What skills or talents do you have that may benefit the iwi?
 Birth Date ____/____/____
 Full Postal Address: Residential Address:
 No. No.
 Street Street
 Suburb Suburb
 City City
 Country Country
 Tick if same residential address

Your Parents

Your Mother

Hapu
 Marae
 Iwi

Your Father

Hapu
 Marae
 Iwi

Your GreatGrandparents

Verification of Whakapapa by Marae/Hapu representative

Print Name: _____ Sign: _____ Date: ____/____/____

Your Children

If you have children under 18 years, please register them here. If you have more children, please attach their details to this form.

First Name Surname Birth Date ____/____/____ Gender Male/ Female
 First Name Surname Birth Date ____/____/____ Gender Male/ Female
 First Name Surname Birth Date ____/____/____ Gender Male/ Female
 First Name Surname Birth Date ____/____/____ Gender Male/ Female

Taiwhenua or Taura Here

Which Taiwhenua or Taura Here do you wish to participate through? Please tick one.

- Wairoa
 Whanganui a Orotu (Napier)
 Heretaunga (Hastings)
 Tamatea (Central Hawke's Bay)
 Tamaki Nui a Rua (Taranaki)
 Wairarapa Whanui
 Te Raki/Tamaki Makau Rau (Auckland and North)
 Te Upoko O Te Ika (Wellington and regions)
 Otautahi (Christchurch)
 Murihiku (Far South)
 Nga Parirau O Te Ika (Waikato, Taranaki, Bay of Plenty)
 Nga Mata Waka

I believe that the information provided on this registration is correct, and I have attached a copy of the required birth date verification documentation.

Signature of Applicant: _____
 Date: ____/____/____

Private Notice Option
 Tick the box if you wish to receive private notice relating to general meetings and postal ballot papers so that you may vote on elections, constitutional amendments, conversion or disposal of settlement quota. The notice will be sent to the address provided on this form.