



# 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 [database@kahungunu.iwi.nz](mailto:database@kahungunu.iwi.nz). P.O. Box 2406 HASTINGS 4153. 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 



  
 Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Full Postal Address: 



  
 No. 



  
 Street 



  
 Suburb 



  
 City 



  
 Postcode 



  
 Country 



  
 Ph 



  
 Fax 



  
 Mobile 



  
 Email 



  
 What skills or talents do you have that may benefit the iwi? Please use a separate page.  
 Tick if same residential address  
 Residential Address: 



  
 No. 



  
 Street 



  
 Suburb 



  
 City 



  
 Country

#### Your Children

If you have children under 18 years, please register them here.

First Name 



  
 Surname 



  
 Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Gender Male/Female

First Name 



  
 Surname 



  
 Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Gender Male/Female

First Name 



  
 Surname 



  
 Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Gender Male/Female

#### Your Parents

**Your Mother**  

  

  
**Hapu**  

  

  
**Marae**  

  

  
**Iwi**

Full Name 



  
 Full Name

**Your Father**  

  

  
**Hapu**  

  

  
**Marae**  

  

  
**Iwi**

Full Name 



  
 Full Name

#### Your Grandparents

Full Name 



  
 Full Name

Full Name 



  
 Full Name 



  
 Full Name 



  
 Full Name

#### Your GreatGrandparents

### Taiwhenua or Taura Here

Please tick ONE Taiwhenua that you whakapapa to or if preferred the Taura Here you wish to participate through.

Wairoa       Whanganui a Oroto (Napier)       Heretaunga (Hastings)       Tamateka (Central Hawke's Bay)       Wairarapa  
 Te Raki/Tamaki Makau Rau (Auckland and North)       Te Upoko O Te Ika (Wellington and regions)       Te Waipounamu (South Island)       Nga Parirau O Te Ika (Waikato, Taranaki, Bay of Plenty)       Tamaki Nui a Rua (Taranaki)       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: 



 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