



# WHANGANUI IWI REGISTRATION FORM

## E te iwi, tena koutou katoa

This registration will be used to identify Whanganui Iwi beneficiaries. All children over 18 years old must fill in their own Registration form also.

**Purpose 1:** *To prepare a correspondence list of people who are descendants of one or more hapu of Whanganui Iwi.*

**Purpose 2:** *To use this correspondence list for further communication.*

**Users:** *This registration form has been formulated for the purpose of maintaining a register of the descendants of the Hapu and Tupuna of Whanganui Nui Tonu that will satisfy the tribal registration of the following organisations – Te Whiringa Muka Trust and the Whanganui River Maori Trust Board*

SURNAME: \_\_\_\_\_

First Name: \_\_\_\_\_

Gender (M/F): \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Contact No: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Please list parents that are affiliated to Atihaunui a Paparangi, Whanganui Iwi only (If deceased, please put "D" beside their name)**

Mother: Hapu & Marae	Grandmother: Hapu & Marae:
	Grandfather: Hapu & Marae:
Father: Hapu & Marae:	Grandmother: Hapu & Marae:
	Grandfather: Hapu & Marae:

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*(Only list your children that are under 18 years of age – over 18 year olds must fill in their own form))*

**CHILDREN:**

*(Birth dates for all children are required. If deceased please write 'D' next to their name)*

First Name	Surname	M/F	DOB	Address

*(If more space is required please use an additional sheet)*

Please feel free to photocopy this form if you know of anybody who is not registered

**DECLARATION:** I declare that the information given in this application is true and correct

**Applicant's signature:** ..... **Date:** .....

**PRIVATE NOTICE OPTION**

Tick this box  if you wish to receive information relating to general meetings of the Trust and voting papers so that you may vote on the election of trustees, constitutional amendments, conversion or disposal of fisheries settlement quota. The information will be sent to the address provided on this form.

**PRIVACY**

The organizations referred to at the beginning of this form will, in accordance with the provisions of the Privacy Act 1993, make available to you upon request the personal information it holds about you and will make any appropriate corrections to that information to ensure that the information held is accurate.