

Nga Potiki A Tamapahore (Nga Potiki)

Application for Registration

SECTION ONE - PERSONAL INFORMATION AND CONTACT DETAILS

Membership Registration Number (Office use only): _____

Please tick the box if you are a Whangai

Surname: _____

First Names: _____

Address: _____

Maiden Name (if applicable): _____

Date of Birth: ____ / ____ / ____

Gender: M / F (circle one)

Phone: () _____

Mobile: _____

Email: _____

Occupation: _____

SECTION TWO - MARAE AND HAPU

(Please indicate which marae and hapu you identify with (there may be more than one))

Marae

1. _____

2. _____

3. _____

Hapu

1. _____

2. _____

3. _____

SECTION THREE - CHILDREN UNDER 18 YEARS OF AGE

(Please note: If your child/ren are 18 years and over they must complete their own enrolment form)

Name

1. _____

2. _____

3. _____

4. _____

Gender

M / F

M / F

M / F

M / F

Date of Birth

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

(Please continue on a separate sheet if required)

Privacy

Nga Potiki Administrators 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 information held is accurate.

Declaration

I declare that the information I have provided is true and correct.

Signed: _____

Date: ____ / ____ / ____

SECTION FOUR - WHAKAPAPA

(This section must be completed before Registration can be accepted)

Great Grandfather	Great Grandmother	Great Grandfather	Great Grandmother
Grandfather			Grandmother
Father			

Place an asterisk * beside the names of those who are Nga Potiki descent

Great Grandfather	Great Grandmother	Great Grandfather	Great Grandmother
Grandfather			Grandmother
Mother			

PLEASE COMPLETE THIS FORM AND RETURN TO:
Nga Potiki Raupatu Committee
C/- Tamapahore Marae, PO Box 4353, Mt Maunganui South
Colin Reeder (Chairman) T: 027 251 5422