

TANATANA MARAE COMMITTEE

REGISTRATION FORM

Who can Register?

To be eligible to register you must be:

- A descendant of Rakuraku.
- Any age (voting only for those 18+).

Why Register?

- To be notified of important issues and decisions affecting Tanatana Marae.
- To have a say, members who are 18 years+ can vote on Tanatana Marae matters.

CONTACT DETAILS

SECTION 1: Contact Details (please print in block letters)

| | | | | |
|-----------------------------|--------|---------------|---------------------|-------------|
| Title (Circle to indicate) | Mr | Mrs | Ms | Miss |
| Last Name | | | | |
| First Name(s) | | | | |
| Alias, AKA | | | Previous Name | |
| Date of Birth (dd/mm/yy) | / | / | Gender (Circle one) | Male Female |
| Spouse (Name) | | | | |
| Home Address | | | | |
| | Number | Street | | |
| City/Town | | | Suburb | |
| Postcode | | | Country | |
| Home Phone | () | Email Address | | |
| Mobile Phone | () | | | |
| Work Phone | () | | | |
| URL (Facebook/Website link) | | | | |

TRIBAL AFFILIATIONS

SECTION 2: Tribal Affiliations

| | | |
|---|--------------|---------------|
| Primary Iwi | Primary Hapu | Primary Marae |
| | | |
| Other Iwi Affiliations (if applicable) (You may include any other Hapū, iwi or ethnicity to which you affiliate) | | |

SECTION 3: Tamariki (if under 18 years old, continue on a separate sheet of paper if required)

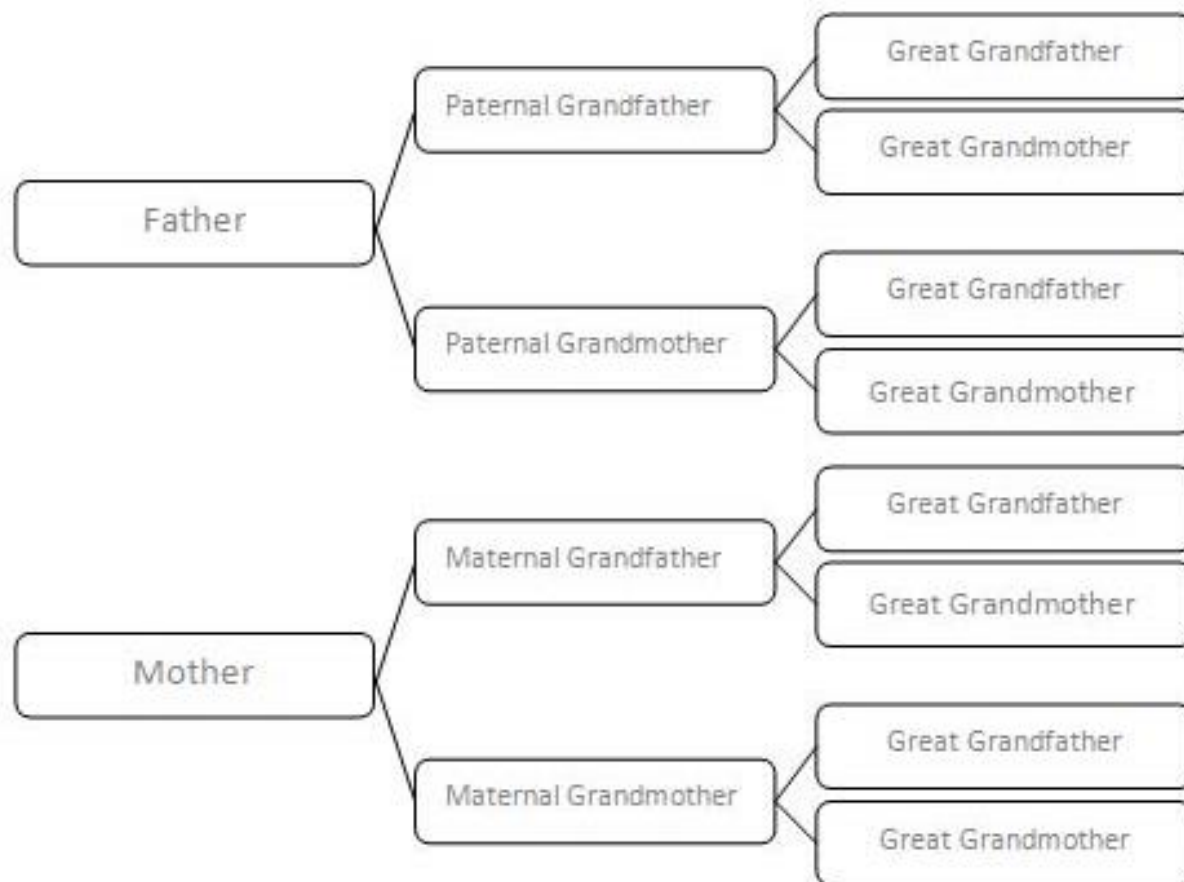
| First Name(s) | Last Name | DOB | M/F | Office Use |
|---------------|-----------|-----|-----|------------|
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SECTION 4: Whakapapa

You are required to complete this section so that we are able to validate your eligibility to register with Tanatana Marae Committee.

A membership committee will validate all applications.



SECTION 9: Declaration

By submitting this form, I agree that:

- All the information in this application is true and correct to the best of my knowledge.
- I understand that the information I provide will be held by Te Tanatana Marae Committee to process this registration.
- Tanatana Marae Committee may collect information about me that may be relevant to processing this application including those noted on my whakapapa
- I understand that I have the right to see and correct my personal information that Te Tanatana Marae Committee Trust holds on its database.

The Tanatana Marae Committee or agents appointed by it, may use this information from time to time to contact me in relation to elections and other matters of importance that may be of interest to me.

| | | | |
|--|-----------|-----------------|--------|
| | | OFFICE USE ONLY | |
| | | Date Received | |
| | | Date Verified | |
| | | | Status |
| | Signature | | Date |

An Annual Registration Fee of \$20.00 can be deposited in the following Bank Account.

If you would like to contribute weekly you may also use the number below please reference your name.

Tanatana Tribal Committee Serious Saver Account
11-6189 0582741 50