



REGISTRATION APPLICATION FORM

Please return completed and signed application form to:
PO Box 127 Gisborne 4010 NZ
Phone: 06 868 5421 or 027 308 1956 or Email: info@whangara.org.nz

WHO CAN REGISTER?

- To be eligible to register you must be a descendant of a Ngati Konohi Tipuna
- Ngati Konohi under 18 years are encouraged to register.
Parents or guardians can sign on behalf of minors

WHY REGISTER?

- To be notified of important issues and decisions affecting Ngati Konohi and Whangara Marae.
- To help us build a profile of Ngati Konohi membership.

PERSONAL DETAILS

Title:	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms		
First Names:			
Last Name:			
Alias or Nickname:		Maiden Name:	
Date of Birth:		Gender:	<input type="checkbox"/> Tāne <input type="checkbox"/> Wāhine
Home Address (St):			
(Suburb):		(City):	
(Country):		(Post Code):	
Postal Address (if different from Home Address)			
(Post Box or Suburb):			
(Suburb or RD):		(City):	
(Country):		(Post Code):	
Phone:		Mobile:	
Email:	I DO / DO NOT want my email on the mailing list.		
Fax:			
Occupation:			
Work Experience:			
Highest Qual:		Education:	
Te Reo Level:	None <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced <input type="checkbox"/> Fluent <input type="checkbox"/>		

TAMARIKI DETAILS

If any of your children are over 18 please have them complete a separate Registration Form

First Name	Middle Name	Last Name	DOB	M/F	Registration ID (Office Use Only)

WHAKAPAPA

The Whakapapa form is structured as follows:

- Your Father** (left box) connects to a central box containing **Grandfather** and **Grandmother**.
- Your Mother** (left box) connects to a central box containing **Grandfather** and **Grandmother**.
- Each central box connects to two stacked boxes on the right:
 - Top box: **Great Grandfather** and **Great Grandmother**
 - Bottom box: **Great Grandfather** and **Great Grandmother**

DECLARATION

I declare all information given to be true and accurate, I understand that Paikea Tahī will use this information collectively with the utmost respect and will only be used by Paikea Tahī for the purpose of marae panui, marae initiatives and research and under no circumstances will it be given to any third parties, nor made public.

Signature _____ Date _____

*Parental/guardian signage required if member is under the age of 18 years old.