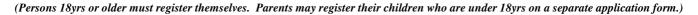
Application Form Ngāi Te Rangi Iwi Members Register



Date of Birth:	/ /	Male / Female <i>(circle one)</i>
Address:		Postal Address:
Email address:		
Please tick this bo	x if you wish to receive information	via email
	(Work)	
Please indicate w	hich NGĀI TE RANGI marae and	hapu you identify with (there may be more than one)
Marae		Нари
Marae		Нари
Marae		Нари
meetings and ele please tick this b Declaration I declare that the	ctions, Trust Deed Amendments ox information I have provided is tr	e a notice and voting papers relating to fisheries related and the Conversion or Disposal of Settlement Quota ue and correct and acknowledge that: In the Ngāi Te Rangi Iwi Members Register held by Te Rūnanga
Rangi lwi TrustI have the rightTe Rūnanga o	and may be transferred to an entity to access and correct the informati Ngāi Te Rangi Iwi Trust, or agents a	v created for the purposes of the Ngāi Te Rangi Treaty settlemer on held by Te Rūnanga o Ngāi Te Rangi Iwi Trust. appointed to it, may use this information from time to time to info gs and elections and/or derive any entitlement as members in th
		Date: /
Signed:		

Whānau Whakapapa

Great Grandfather	Great Grandmother	Great Grandfather	Great Grandmothe
Grandfather			Grandmother
		I	
		Father	

Place an asterisk * beside the names of those who are Ngāi Te Rangi descent

Great Grandfather	Great Grandmother	Great Grandfather	Great Grandmothe
Grandfathe	r		Grandmother
	r	Mother	
	T	Mother	