

## Please send completed forms to:

Whakatohea Maori Trust Board 122 St John Street - PO Box 207 - OPOTIKI Ph. 07 315 6150 Fax 07 315 7968

Email: <u>info@whakatohea.co.nz</u>
Website: <u>www.whakatohea.co.nz</u>



# **APPLICATION FORM**

### **FOR**

# WHAKATOHEA REGISTER OF BENEFICIARIES

• First read carefully the *Notes to the Application* on reverse

OFFICE USE ONLY

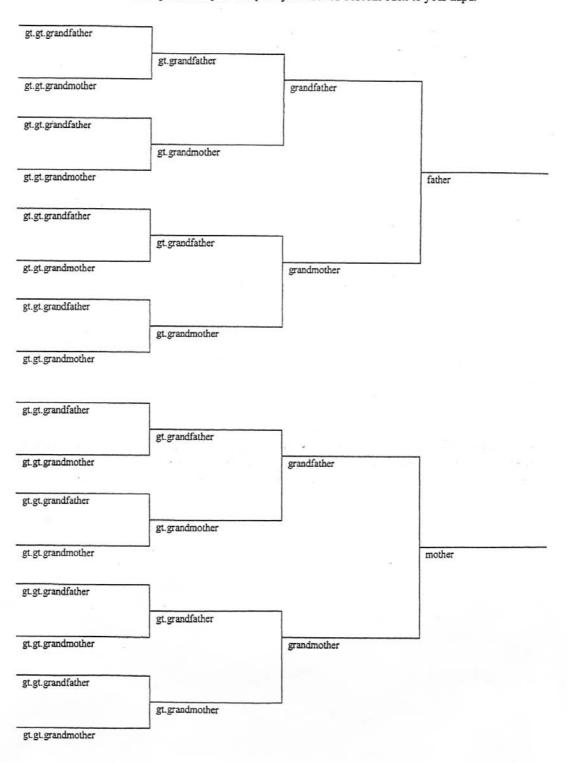
Date Received:

Roll Number: #

First Names				Surna	me		male female			
Address				Maiden N			ame (If Applicable)			
Town										
Your date of birth	Your Occupation			Contact Phone Numbers						
/ /					ay: nail:	Night:				
day month year  Name Of Partner				Partner's iwi (if applicable)						
Names of Your Children				Date of Birth			Male/Female			
1				/		/				
2				/		/				
3			/			/				
4				/		/				
5				/		/				
6				/ /						
7				/ /						
8				/		/				
Please tick those Hapu & Marae you affiliate to										
Ngai Tamahaua - Opape Marae			Ngati Ruatakena - Omarumutu Marae							
Ngati Ira - Waioweka Marae			Upokorehe - Roimata Marae							
Ngati Ngahere - Terere Marae				Upoko	reh	ie - Maromahu	e Mai	rae		
Ngati Patumoana - Waiaua Marae			Upokorehe - Kutarere Marae							
Please tick which hapu you wish to be registered to vote in										
NOTE: You can only tick one hapu  Ngai Tamahaua  Ngai Patumoana										
	-			Ü						
Ngati Ira				_		ıtakena				
Ngati Ngahere				Upokorehe (Please circle which Marae – R, M or						
				(Please K)	circ	cie wnich Marae	– K, N	ı or		

WHAKAPAPA - please complete just your Whakatohea lineage - if you know it.

It is only necessary to complete your line of descent back to your hapu.



#### NOTES TO THE APPLICATION

#### **Entitlement to register**

Only those persons who can whakapapa directly by blood lines to the hapu of Whakatohea.

#### Inability to complete enrolment form

To be registered as a beneficiary it is necessary that you prove your entitlement to be registered. However, if you are unable to complete all parts of your enrolment form do as much as you can and send the form in. The Trust Board will check your enrolment form and if they are able to, will complete the form for you.

#### Affiliation to hapu

It is recognised many are able to whakapapa to more than one of the hapu of Whakatohea. While you must designate one hapu for voting purposes, you are welcome to list all hapu you can affiliate to.

### **Spouse Partner**

If your spouse/partner can whakapapa back to a hapu of Whakatohea then he/she will need to complete their own separate enrolment form. A spouse/partner who is unable to Whakapapa back to a hapu can be entered on your enrolment but will not be registered as a beneficiary.

### Issue (Nga Tamariki)

You should list all <u>your</u> issue (children) on this enrolment form. Those who are 18 years or older <u>MUST</u> complete their own enrolment form. Please use a separate piece of paper if you have more than eight (8) issue. Beneficiaries under the age of 18 will be registered but not for voting purposes.

### Whakapapa

It is accepted your whakapapa is your personal taonga. However, it is a requirement for you to prove your entitlement to be entered onto the Whakatohea Beneficiaries Register.

#### **Change of Address**

Every time you change your address or if any of your other details change or need correcting, please contact the office at the Whakatohea Maori Trust Board.

#### I declare that the information given in this application is true and correct.

Whakatohea Maori Trust Board 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 corrections to that information to ensure that the information held is accurate. ALL information will be kept CONFIDENTIAL and PROTECTED.

Applicants Signature: _	Date:				
The Board reserves the right to disallow any application because of insufficient or incorrect information. The onus for inclusion onto the Whakatohea Beneficiary register is on the applicant and not the Board.					
OFFICE USE ONLY - ENDO	ORSEMENT BY BOARD MEMBER - OFFICE USE ONLY				
As a Board member for the named preferred hapu stated above, I confirm the above named person is a beneficiary of the hapu and endorse their inclusion onto the Beneficiary Register of the Whakatohea Maori Trust Board.					
Signature:	Date:				