Download this form to your computer first so you may fill in the fields

## Personal details

First name		Middle names	
Surname			]
Address		Postc	
City	Country	Conta	act phone
Email		Date	of birth Gender

## If you have children under the age of 18 year please enter their details below. Please note: If your children are over 18 years of age, they must complete their own enrolment

Full Name	Date of birth	Gender
	$\overline{}$	

Do you want to receive communications about Ngāti Rāhiri Hapu o Te Atiawa Society Inc Yes No No Tick "Yes "if you wish to receive private notices and information relating to general meetings, elections, postal ballot papers and hapū updates. All notices will be sent to the address and/or email provided on this form.

## Declaration

I hereby declare that the information provided in this application is true and correct. By ticking the box, you confirm this declaration. YES

For us to proceed your enrolment, we require proof of identity. If you do not have a birth certificate, passport or driver's license please email register@ngatirahiri.co.nz to discuss other identification options. I also acknowledge it is my responsibility to inform Ngāti Rāhiri Hapu o Te Atiawa (Taranaki) Soc Inc if my contact details change.

## **Privacy**

Ngāti Rāhiri Hapū o Te Atiawa (Taranaki) Society Incorporated will act in accordance with the provisions of the Privacy Act 2020, 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 the information held is accurate.

Please note the Register is shared with Nga Uri o Ngati Rahiri Whenua Trust.

Please return the completed form to: Ngāti Rāhiri Hapū o Te Atiawa (Taranaki) Society Inc. Attn: Registrations, PO Box 132, Waitara 4320, New Zealand or via email: <u>register@ngatirahiri.co.nz</u>