

Registration form for Ngāti Maringi

Please email maringi.hapu@gmail.com if you have any questions or need help.

First name(s)				
Surname		Maiden name (if applicable)		
Date of birth		Gender (please tick)	Male	Female
Home address				
Phone number(s)		Cellphone number		
Email address		Occupation		

WHAKAPAPA (If deceased, please put "D" beside their name)

Mother	Grandmother	Father	Grandmother
	Grandfather		Grandfather
	Great Grandmother		Great Grandmother
	Great Grandfather		Great Grandfather

DECLARATION: I declare that the information given on this form is true and correct, and I understand it is my responsibility to ensure that my contact details are current. **Privacy Statement:** The information we collect from you will be held on a confidential database and will not be disclosed to any other person or organisation unless authorised by you. You have the right to see and correct your information.

Signature _____ Date _____

PERMISSION TO ADD MY REGISTRATION TO the Uenuku Charitable Trust tribal register: Tick box if you give your consent to adding your registration to the Uenuku Charitable Trust tribal register.	<input type="checkbox"/>
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- **Are all your whānau registered?** Please help us to keep all whānau informed, involved and connected by ensuring all whānau members are registered on the Ngāti Maringi hapū register.
- **For more information:** Contact us at maringi.hapu@gmail.com or phone Nuthaniel Tonihi 021 0877 1520 or Cindy Hiroti 027 777 1387.
- **Get instant access to our news and information:** LIKE us on Facebook @ **Ngāti Maringi Trust.**