

Roll No:

NGĀTI TAMATERĀ TRIBAL ROLL

Please send completed form to:
NGATI TAMATERA TREATY CLAIMS TRUST
PO Box 116 Paeroa 3640
Phone: 07 868 8439 or 021 133 2760
Email: tamatera@hotmail.com

Personal Details

First Names			
Surname			
Maiden Name or other names			
Gender (please circle)	Male	Female	
Date of Birth		Occupation	
Street Address			
Suburb			
City			Post code:
Country			
Home Phone		Mobile	
Email address			

Family Information

Name of spouse	
Iwi of spouse	

Children (children over 18 should register as an adult member)

Full Legal Name	DOB	M/F	Address (if different to yours)

Use separate sheet for any additional children.

NGATI TAMATERA REGISTRATION

Please complete the following whakapapa. Your full name should be given and the names of both parents. You **only** need to complete your Ngāti Tamaterā whakapapa. You will be advised of confirmation of your membership once verified by Ngati Tamaterā kuia/kaumatua.

YOU

Matua/Father	Whaea/Mother (Maiden Name)
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Koroua/Paternal Great Grandfather</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Koroua/Paternal Grandfather</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Kuiua/Paternal Great Grandmother</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Koroua/Paternal Great Grandfather</div> <div style="border: 1px solid black; padding: 5px;">Kuiua/Paternal Great Grandmother</div>	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Koroua/Maternal Great Grandfather</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Koroua/Maternal Grandfather</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Kuiua/Maternal Great Grandmother</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Koroua/Maternal Great Grandfather</div> <div style="border: 1px solid black; padding: 5px;">Kuiua/Maternal Great Grandmother</div>

Declaration and Statement to comply with the provisions of the Privacy Act 1993:

I hereby declare that:

1. *I am a blood descendant of Ngāti Tamaterā*
2. *All the information contained in this registration form and whakapapa is true and correct.*
3. *I understand that the information I provide will be held by the Ngāti Tamatera Negotiators or agents appointed by it to process this registration.*
4. *The Ngāti Tamaterā Negotiators, or agents appointed by it, may use this information from time to time to contact me in relation to the Ngāti Tamaterā Treaty Claims negotiation and settlement process.*
5. *I have the right to access and correct my information.*

Signed: _____ Date: _____

Date Received:	Date Reviewed:	Reviewed by:
Status: Approved / Denied / More Information		Date Entered:
Comments:		