

Voting Registration Form

Te Ākitai Waiohua
PO Box 59 185
Mangere Bridge
AUCKLAND 2151

Registration Number

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Why Register?

Te Ākitai Waiohua seeks to enter into negotiations with the Crown for comprehensive and final settlement of all remaining historical claims of Te Ākitai Waiohua. In order to achieve this, whanau will need to make a number of important decisions throughout the whole process.

These include:

- Agree on a Deed of Settlement
 - Agree on any other key decisions of significance
- By registering you will be able to:
- Participate in decision-making
 - Be notified of important issues and progress

For more information go to

www.teakitai.com

Who Can Register?

To be eligible to vote you must be:

- A direct descendant of Kiwi Tamaki
- Aged 18 years or over

Kaumatua and Kuia will validate your registration

If you do not have anyone to verify your whakapapa please contact the following people who can assist you:

Brownie Rauwhero

☎ 021 875 918

✉ tawia@teakitai.com

David Wilson

☎ 021 0856 3963

✉ tawia@teakitai.com

Section A: Personal Details

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

(Mr,Mrs,Miss, Ms)

(First Name)

(Last Name)

(Postal Address)

(Phone Number)

(Mobile Number)

(Email Address)

PRIVACY

The information supplied is confidential within the terms of the Privacy Act 1993, and for the lawful use by Te Ākitai Waiohua, for the purpose of the Treaty Settlement process. A person may only access their own personal information.

Section B : Declaration

I hereby declare that:

1. All information contained in this registration form and whakapapa is true and correct.
2. I understand that the information I provide will be held by Te Ākitai Waiohua to process this registration.
3. Te Ākitai Waiohua may use this information to contact me in relation to elections and other matters of interest to me.
4. I have the right to access and correct information held by Te Ākitai Waiohua that is about me.
5. I authorise Te Ākitai Waiohua to collect information about me that may be relevant to the processing of this application, inclusive of information noted on this whakapapa.
6. The date of my birth is / / 19

Signature _____

Date / / 20

This application will not be accepted unless fully completed

OFFICE USE ONLY

Check List

- Entered all information
- Proof of birth
- Whakapapa verified
- Signed and dated

Action

Date received
Date validated
Date entered
Applicant notified

Date

By (Initial)

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Section C : Whakapapa

| | | | | |
|--------------------------|------------|-------------|--|-------------|
| <input type="checkbox"/> | Descendant | Verified by | | |
| | | Signature | | Date / / 20 |

Father

Mother

Grandparents

Great Grandparents

Great-Great Grandparents

Great-Great-Great Grandparents

