



Application Form
for
Ngati Turangitukua Charitable Trust Register of Beneficiaries

Before completing this application please read carefully the
"Notes to the Application"
on the back page.

On completion please forward the forms to:

The Ngati Turangitukua Whakapapa Committee
PO Box 43
Turangi 3353

Email: turangitukua.whakapapa@gmail.com

Office Use Only

Date Received: / /

Number:

PLEASE COMPLETE ALL FIELDS

First Names:	Surname:	Gender: (tick box)
	Maiden Name:	Male <input type="checkbox"/>
		Female <input type="checkbox"/>
Address: (Please include Postal Code)		
Your date of birth:	Telephone #:	Email:
	Mobile #:	
Occupation (where applicable):		
Names of children under 18 years	Date of birth	Male or Female
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
Names of siblings (brothers & sisters)	Date of birth	Address if known
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Please complete **ONLY** your **Turangitukua Whakapapa** in this section. No other whakapapa is required. *(print clearly)*

Great Great Grandfather			
	Great Grandfather		
Great Great Grandmother			
		Grandfather	
Great Great Grandfather			
	Great Grandmother		
Great Great Grandmother			
			Father
Great Great Grandfather			
	Great Grandfather		
Great Great Grandmother			
		Grandmother	
Great Great Grandfather			
	Great Grandmother		
Great Great Grandmother			
			Your Name
Great Great Grandfather			
	Great Grandfather		
Great Great Grandmother			
		Grandfather	
Great Great Grandfather			
	Great Grandmother		
Great Great Grandmother			
			Mother
Great Great Grandfather			
	Great Grandfather		
Great Great Grandmother			
		Grandmother	
Great Great Grandfather			
	Great Grandmother		
Great Great Grandmother			

How do you whakapapa to Turangitukua?

Please show your Turangitukua descent from ONE ONLY of names shown below:

TURANGITUKUA = TE REWHANGAOTERANGI

|

|

Hingaia

|

Te Mahaoterangi

|

Te Rangitautahanga

|

Hinerangi

(Name of applicant/Mokopuna)

Notes to the Application

Entitlement to Register

Only those persons who can whakapapa directly by bloodline to the hapu of Ngati Turangitukua are entitled to register.

Inability to complete enrolment form

To be registered as a beneficiary it is necessary that you prove your entitlement to be registered.

Issue (children)

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

Siblings (full brothers and sisters)

Please also list your siblings, their dates of birth and if possible their postal and/or email addresses.

Whakapapa

It is accepted your whakapapa is your personal taonga. The provision of your whakapapa is required only to prove your entitlement to be placed on the Ngati Turangitukua Charitable Trust Beneficiaries Register.

Change of Details

Should there be a change in your personal details (address, phone, email, etc.) please advise us in writing.

I declare that the information provided in this application is true and correct. Pursuant to the Privacy Act 1993, the information will be used at the discretion of the Ngati Turangitukua Charitable Trust and/or its successors.

Applicant's signature: _____ Date: / /

The Ngati Turangitukua Charitable Trust reserves the right to not accept any application due to insufficient or incorrect information.

The onus for inclusion on the Ngati Turangitukua Charitable Trust Beneficiary Register is on the applicant only, not the Ngati Turangitukua Charitable Trust.

Office Use Only: Endorsement by Ngati Turangitukua Charitable Trust

As authorised by the Ngati Turangitukua Hapu and the Ngati Turangitukua Charitable Trust, I confirm the abovenamed applicant is a beneficiary of the Hapu and thereby endorse their inclusion on the Ngati Turangitukua Charitable Trust Beneficiary Register.

Signature: _____ Date: / /
