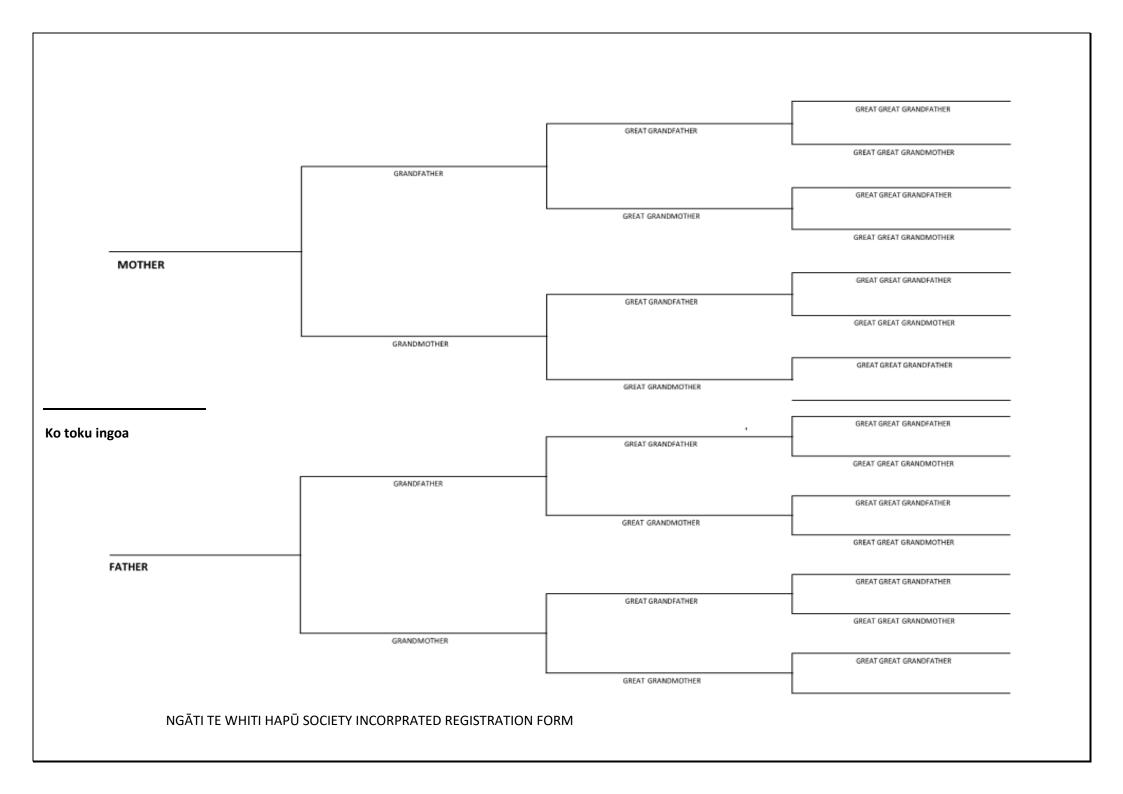


## NGĀTI TE WHITI HAPŪ SOCIETY INCORPORATED REGISTRATION FORM

LAST NAME		
FIRST NAMES		
BIRTH DATE		
ADDRESS		
	Postcode	e
EMAIL		
GENDER Tane Wah	Occupation	
YOUR TAMARIKI		TAMARIKI BIRTH DATE
TUPUNA – Please see list attached Page 4  1,  2,  Declaration: I declare that:		
* I am over 18 *I am of No	gāti Te Whiti descent *The information	given here is correct
SIGN	DATE	
By signing this form I give consent to becor	me a member of this society under the new the	Incorporated Societies Act 2022.
Please post your completed form to -	The Registrar	
	Ngati Te Whiti Hapu Society Incorporated F	PO Box 304
	Richmond Centre New Plymouth	
Or email:	registrations@ngatitewhitisocietyinc.co.nz	
Note: All information is protected under the	Privacy Act	
Registration Committee Signatures:		
		Registration No:



Ngāti Te Whiti Hapū EXTRA PAPER FOR INFORMATION IF REQUIRED



TUPUNA LIST

To Be Added

Nga mihi Nui