

# Te Aroa Haereiti Whanau Charitable Trust Registration Form

Registration Number: ..... (recorded and given by archivist)

Calendar Year/ Month: \_\_\_\_\_ (Year of Application)

## SECTION 1: WHAKAPAPA

**Please complete your direct lineage to Te Aroa Haami Haereiti**  
**Circle Tupuna Line ⇒ NGAHUIA - POU MATAAHO - TE ONE**

.....  
Great Grandparents

.....  
Great Grandparents

.....  
Grandparents

.....  
Grandparents

.....  
Parents

.....  
Applicant/Kaitono

## SECTION 2: APPLICANTS DETAILS

***Please Note: The following details are to be true and correct. Any change of details, please ensure the trust has been notified and updated on your official registration.***

Full Name: .....

Postal Address: .....

Contact Number: .....

Email: .....

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ dd/mm/yy \_

Male

Female

The Privacy Act 1993

The information gathered will be held in accordance with the Privacy Act requirements combined with Te Aroa Haereiti Whanau Charitable Trust Archive Record Management Policy procedures. Details on the application will not be used for any other purpose without your consent/Trustee approval. You have the right to access and correct the information on the Registration Form at any time. Any person aged 18 years or above should complete their own form

# Te Aroa Haereiti Whanau Charitable Trust Registration Form

## SECTION 3: PROOF OF IDENTIFICATION

To confirm your registration/grant application, please attach one of the following:

Copy of Birth Certificate   
  License   
  Passport   
  Student ID

## SECTION 4: ENDORSEMENT/WRITTEN REFERENCE

This application will only be accepted after a Kaumatua/Kuia/Elder, Maori Liaison Officer, or Tutor/Teacher/Medical Official has endorsed the form. The endorser must know the applicant. If Kaumatua/Kuia/Elder are approving the application, they are required to initial the whakapapa page as confirmation, that details are true and correct.

You are welcome to attach further endorsements with your application.

I have known this applicant for \_\_\_\_\_ years \_\_\_\_\_ months and I endorse this application because:

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Endorsers Name: .....

Endorsers Contact No: ..... Endorsers Title: .....

Endorser's signature:.....

Date Endorsed: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / dd/mm/yy

### TRUST OFFICIALS TO COMPLETE BELOW

Accountant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Trustee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chairperson Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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# Te Aroa Haereiti Whanau Charitable Trust Registration Form

This grant applies to the following objectives as outlined in the Trust Deed.

## 1 Objectives of the Trust

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1.1 The objectives of the Trust are to:

- a Provide financial assistance:
  - iii. For the physical, spiritual, and emotional needs of sick rawa-kore members including the mentally ill and aged rawa-kore; members
  - iv. For the carrying out of other charitable purposes within New Zealand;
  - v. For cases of human and material loss to pohara members, including damage to homes and belongings by fire, earthquake, and other natural disasters, tangi or funeral costs and expenses together with assistance for the pohara families of the deceased; and
  - vi. To develop and foster the use of a community centre as a centre for living and experiencing marae activities and to develop sensitivity in the general community to Tikanga Maori.

## 2 Mandatory Practices and Process for all Grants

- i) Support documents, banking details, quotes and/or receipts must be current with dates no later than a **one month period**, of the date stated on the grant application
- ii) Support documents must be scanned, mobile photos are not accepted.
- iii) The trust will only accept **one application** per year, per grant.
- iv) For all successful applications, please allow 11 working days work grants to be processed and transactions to go through. If a grant fails to meet the guidelines or is lacking evidence, it will be deemed unsuccessful.
- v) Inappropriate conduct towards any trustee of Te Aroa Haereiti Whanau Trust will result in an instant decline of the current grant application.

### **CONTACT DETAILS:**

**Please send/give this completed application to your whanau trustee or email it to our Trust Secretary:**

Tia Cairns  
tiacairnsjdb@gmail.com

The Privacy Act 1993

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