



ŌRAKA-APARIMA RŪNAKA REGISTRATION FORM

MEMBERSHIP DEFINITION

Membership of the Rūnaka shall be open to all persons who can trace genealogical descent to Waitaha, Kati Māmoe and Kai Tahu Tipuna; and to all persons who are listed as Kai Tahu Kaumātua in 1848 Blue Book; residing in the takiwā of Ōraka-Aparima (as defined by the Te Rūnanga o Ngāi Tahu Act 1996). Membership shall be nominated and approved. This is further defined below, which is identified in the Ōraka-Aparima Rūnaka Incorporated Constitution.

Ōraka-Aparima Rūnaka Application for Membership

5.1.1 Membership of the Rūnaka shall be open, on application, on acceptance of application, to all persons who are members of Ngāi Tahu Whānui and descend from a Ngāi Tahu tipuna who held customary rights and interests within the takiwā of Ōraka Aparima pre-1840 and consent to being a member. Members registered under this clause shall be known as “Whakapapa Members”.

5.1.2 Membership of the Rūnaka shall be open, on application, on acceptance of application, to all persons who are members of Ngāi Tahu Whānui and at the time of application are resident in the takiwā or Ōraka-Aparima and consent to being a member. Members registered under this clause shall be known as “Ngāi Tahu Whānui Members”.

Also: Please note that this registration is separate from that maintained by the Whakapapa Registration Unit of Te Rūnanga o Ngāi Tahu.

PERSONAL INFORMATION

Full Name: _____ M/F _____ D.O.B: _____
First Last Gender

Address: _____

City Zip Code

Phone: _____ Email: _____
Skills and _____
Interests: _____

Would you like to receive pānui from the office via email: Yes / No

Are you registered with the whakapapa unit of Te Rūnanga o Ngāi Tahu: Yes / No

If yes, your Ngāi Tahu Registration is: _____

A registration form will need to be completed for each individual wanting to register with Ōraka-Aparima Rūnaka. Please complete the Whakapapa Information on the following page. Once completed, sign and date this form. This form can be sent to:

- Email: office@orakaaparima.org.nz
- Mail: Enrolments Officer, Ōraka-Aparima Rūnaka, 1752 Palmerston Street, Riverton 9822



WHAKAPAPA INFORMATION

Please show your connection between the 1848 Kaumātua and yourself to show your affiliation (as detailed in the Blue book).

Your Name:	_____	M / F
Your Parent:	_____	M / F
Their Parent:	_____	M / F
Their Parent:	_____	M / F
Their Parent:	_____	M / F
Their Parent:	_____	M / F
Their Parent:	_____	M / F
Their Parent:	_____	M / F

Please list the 1848 Ōraka-Aparima/Ngāi Tahu Kaumātua you descent from:

1848 Kaumātua Name	Kaumātua No.	File No:	Ōraka/Aparima
			Indicate applicable if known

APPLICATION DECLARATION

Before signing this form, please take a moment to check that all required information has been supplied.

Signing and dating this section confirms you have read and understand the following conditions:

- I certify that all information supplied in this application is true and correct.
- I acknowledge that the information contained in this form provided by me to Ōraka-Aparima Rūnaka is subject to the Privacy Act 1993.
- I agree to Ōraka-Aparima Rūnaka may use this information to maintain its membership records, contact databases and any other purpose which Ōraka-Aparima Rūnaka considers reasonable, whilst performing its statutory role.

Signature: _____ Date: _____