

Wānanga/Hui Registration of Interest

(Please note: completing and sending us this application does not automatically guarantee attendance.)

APPLICANT DETAILS

Name of wānanga/hui: _____

Surname: _____

First names: _____

Age: _____ Gender: Male Female Gender diverse

Hapū: _____

Email address: _____

Home address: _____

T-shirt size: _____

I grant Ngāti Apa ki te Rā Tō and its approved partners full rights to use my digital images taken at this event for future promotions, advertising, or other purposes. This might include (but is not limited to), the right to use them in print, social media, press releases and funding applications.

Yes No

Emergency contact details – MUST COMPLETE

Note: This must be someone aged 18 years or older who is NOT attending the wānanga with you.

Emergency contact name: _____

Phone number: _____

Email: _____

Are you a registered member of Ngāti Apa ki te Rā Tō, or do you have an application for membership awaiting processing? Yes No

If 'No' please explain your relationship to the iwi. You can request a registration form by calling us on 0800 578 900.

The following section assists Ngati Apa ki te Rā Tō to meet its responsibilities in providing a healthy and safe environment for all wānanga participants. Be aware that wānanga can be held in isolated locations some distance from medical facilities. Some activities also require a degree of physical fitness.

1. Do you have any allergies that may pose risks to your health and safety, or that of others attending the wānanga?

Yes No

If 'yes', please provide details and, if applicable, how you will manage an allergic reaction, should one occur.

2. Do you have particular dietary requirements? Yes No

Please provide details below. Note that while we will make reasonable efforts to accommodate these, we cannot make any commitment that these will be provided for.

3. Do you have any physical disability(s) or mental health that we should be aware of, and which may impact on your health and safety, or those of others attending the wānanga? Yes No

If 'yes', please provide details

4. Some activities involve a reasonable degree of physical exertion and fitness, i.e. hiking, climbing, swimming.

Do you have a heart condition or any other medical condition that may impact on your ability to safely undertake these activities? Yes No

If 'yes', please provide details

If you answered 'Yes' to either question 3 or 4, we may require you to obtain a doctor's certificate attesting to your health and fitness before accepting your application.

Depending on where you live, the Ngati Apa ki te Rā Tō Trust may be able to provide assistance with your costs of travel to the wānanga. This assistance is provided at the discretion of the Trust.

Do you wish to apply for travel assistance? Yes No

TE KAWA O TE AKO / CODE OF CONDUCT GUIDELINES

A high standard of behaviour is required from all attendees at wānanga and hui, and tikanga and kawa (marae protocol) guide all that we do.

This policy outlines how participants are expected to conduct themselves at iwi gatherings. All individuals are to read this policy and become familiar with and abide by these rules, kawa (protocol) and tikanga (accepted practices and customs) at all times.

Expectations:

- Appropriate behaviour is required at all times, including respecting all people and property.
- Parents/caregivers are responsible for tamariki at all times.
- Take note of emergency procedures and follow instructions of the facilitators in the event of an emergency.
- Report any accidents or incidents to the person in charge.

Zero tolerance:

- Absolutely no alcohol or drugs are permitted to be consumed whilst on-site or prior to arriving on-site. Anyone suspected of being under the influence of alcohol or drugs will be asked and required to leave without delay.
- Aggressive, abusive, intimidating or bullying behaviour of any sort will not be tolerated. Anyone who displays such behaviour will be asked and required to leave without delay. Non-observance may also result in participants being disallowed to attend other iwi events.
- No smoking or vaping is allowed on the premises, except if you have been informed of a designated area.

Your co-operation is appreciated.

DECLARATION

- The information I have provided in this application form is true and correct. I have disclosed all information relevant to ensuring my health and safety (and that of others) at this wānanga/hui.
- I have read and understood, and agree to abide by the tikanga listed in the Te Kawa o Te Ako Guidelines.
- I understand that if I have provided false or misleading information, or omitted pertinent information, I may be removed from the wānanga/hui and my future participation in iwi events may be put at risk.

Name of applicant: _____

Signature: _____ Date: _____

For office use only:

Application deferred Application approved

Applicant notified: Yes No

Iwi register details inputted / updated: Yes No

Entered by (initials) _____

