



## WĀNANGA APPLICATION FORM

(PLEASE NOTE: COMPLETING AND SENDING US THIS APPLICATION DOES NOT AUTOMATICALLY CONSTITUTE ACCEPTANCE.)

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Gender: Male / Female

Hapū: \_\_\_\_\_

Do you currently live within the Te Tau Ihu/West Coast area: Yes / No

Phone number (mobile preferred): \_\_\_\_\_

Email: \_\_\_\_\_

Physical address:

Guardian Name/s (if under 18 years of age):

Phone number:

Email:

Are you **currently** on the Ngāti Apa ki te Rā Tō Trust iwi register? Yes / No

*(If you circled 'No' please explain your relationship to the iwi. You can request a registration form by calling us on the number at the bottom of the page)*

Are you currently involved in Ngāti Apa ki te Rā Tō activities/initiatives? Yes / No

*(If 'Yes' please give details)*

Have you previously attended Ngāti Apa ki te Rā Tō wananga? Yes / No

*If 'Yes' please provide details, including dates, places and number attended)*

How do you see yourself furthering your involvement and engagement with Ngāti Apa ki te Rā Tō in the future?



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 you circled 'Yes', please provide details and, if applicable, how you will manage an allergic reaction, should one occur.)*

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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.)*

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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 you circled 'Yes', please provide details)*

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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.)*

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*(If you answered 'Yes' to either Q3. or Q4. 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 can 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



**A high standard of behaviour is required from all attendees at Wānanga, Please read and ensure you understand the requirements below:**

### Te Kawa o Te Ako Wānanga Guidelines

In ancient times Whare Wānanga were governed by strict kawa and tikanga (accepted practices and protocols), which ensured that the transferral of sacred iwi mātauranga (knowledge) and lore was done in a correct and appropriate manner.

This applied to both the gifting and receiving of these taonga.

We use the same pedagogy today to ensure the mana and integrity of the Whare Wānanga, the marae and all participants. Whakamana (respect) and ngākau māhaki (humility) are the values of rangatiratanga.

This applies to tīnana (physical safety), wairua (spiritual wellbeing) and hinengaro (mental wellbeing). Our aim is to create an environment which promotes and produces cultural excellence, belief and leadership.

All participants must adhere to the following tikanga:

- You must obey the instructions of kaiako at all times.
- Manaakihia te tangata look after and respect one another.
- The Marae is our principal home and we accord it respect at all times.
- We speak te reo Māori as much as possible.
- No drugs (except those for a declared medical condition) or alcohol are to be consumed or brought to Wānanga or marae under any circumstances.
- Fighting and/or bullying behaviour will not be tolerated.
- No sexist, racist or derogatory language is to be used under any circumstances.

The breaking (or non-observance) of any of these tikanga may affect your ability to attend future Wānanga. In the case of serious breaches we reserve the right to arrange for the person(s) immediate removal from the Wānanga.

- 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.
- I have read and understood, and agree to abide by the tikanga listed in the Te Kawa o Te Ako Wānanga Guidelines.
- I understand that if I have provided false or misleading information, or omitted pertinent information I may be removed from the Wānanga and my future participation in tribal events may be put at risk.

**Tauira name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of tauira (or guardian if under 18 years of age):** \_\_\_\_\_

For office use only:	Application deferred / approved	Applicant notified: Yes / No
	Iwi register details inputted / updated: Yes / No	Entered by (initials)