



Bring your voice, whakapapa and hope.

MOREHU PARTY is being established and is not yet registered by the Electoral Commission.

Fields marked * are required. Cultural and whakapapa fields are optional and may be left blank.

YOUR DETAILS

Full legal name *

Preferred name

Date of birth (DD/MM/YYYY) *

Residential address *

Suburb / town / city *

Postcode *

Email *

Phone *

WHAKAPAPA AND CONNECTIONS

Optional - share only what you choose

Iwi / peoples

Hapu

Marae / community

Rohe / place you call home

Maunga

Awa / moana

Waka

Other connection you wish to share



WHY YOU ARE JOINING

What draws you to MOREHU PARTY and what future do you want to help build?

KAUPAPA YOU CARE ABOUT

Tick any that apply

- | | |
|--|--|
| ☐ Whanau and housing | ☐ Hauora and wellbeing |
| ☐ Rangatahi and education | ☐ Economic dignity and local enterprise |
| ☐ Whenua, water and kaitiakitanga | ☐ Public trust and accountable leadership |

WAYS YOU MAY WISH TO HELP

Optional

- | | |
|---|--|
| ☐ Volunteer at hui or community events | ☐ Help welcome and organise members |
| ☐ Contribute ideas or policy experience | ☐ Support an electorate campaign |
| ☐ Creative, music, media or design support | ☐ Other skills or support |

Skills, experience, languages or support you would like to offer

COMMUNICATION PREFERENCES

- | | | | |
|--------------------------------|---------------------------------------|-------------------------------|---|
| ☐ Email | ☐ Phone / text | ☐ Post | ☐ Party news and hui updates |
|--------------------------------|---------------------------------------|-------------------------------|---|



APPLICANT DECLARATION

- ☐ I apply to become a founding member of MOREHU PARTY, subject to acceptance under the party rules.
- ☐ I confirm that I am eligible to enrol as a New Zealand elector.
- ☐ I agree to uphold the party's constitution, kaupapa and lawful democratic processes once adopted.
- ☐ I understand that membership is not complete until my application is accepted and the approved fee is received.
- ☐ I confirm the information supplied is true and I consent to confidential membership verification.

Type full name as signature *

Date *

FOUNDING MEMBERSHIP FEE

\$1

Proposed founding membership fee

Pay only after receiving verified instructions from an authorised party officer.
Do not send passwords, PINs, card numbers or online-banking login details.

PRIVACY AND PROCESSING

Your information will be used for membership administration, contact, governance and Electoral Commission verification if the party later applies for registration. Cultural and whakapapa information is optional. Access should be limited to authorised officers and retained securely under the party privacy policy.

PARTY USE ONLY

Date received

Member number

Accepted by authorised officer

Payment reference / receipt

Date entered in register