



# Kiwi Family Trust

"Tina Kina Tika Whanau O Aotearoa"  
"Helping People to Help Themselves"

## Firewood Enrolment Form

### Personal Details:

(Mr) (Mrs) (Miss) (Ms) \_\_\_\_\_  
First Name/s and Surname

Contact/Delivery Address \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail address \_\_\_\_\_

Mobile no. \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Male / Female

With which ethnic group(s) do you identify?

NZ European/Pakeha  Maori  Pacific Island  Asian  Other (Please specify \_\_\_\_\_)

Residency Status: NZ Citizen \_\_\_\_\_ NZ Resident \_\_\_\_\_ Other (please specify): \_\_\_\_\_

Work & Income No: \_\_\_\_\_

Com Services Card No (or other id): \_\_\_\_\_

Income Source: **Benefit (please circle):**  
Wages \_\_\_\_\_ National Super \_\_\_\_\_ Other (please specify): \_\_\_\_\_

Living Situation: Flattng \_\_\_\_\_ Housing NZ \_\_\_\_\_ Own Home \_\_\_\_\_ Relative \_\_\_\_\_ Renting \_\_\_\_\_

Family Type: Couple (with children) \_\_\_\_\_ Couple (no children) \_\_\_\_\_ Pensioner \_\_\_\_\_ Individual \_\_\_\_\_ Single Parent \_\_\_\_\_

**All recipients of Firewood gifted by local companies must have a community services card, be on a pension, or have gone through substantial hardship. Be aware that Kiwi Family Trust does not pay out money from the Firewood Savings Fund and the money can only be used for firewood next year. There are no exceptions.**

**Client Privacy Waiver** | Please have sign and date the following/sign on their behalf

The Kiwi Family Trust Collects this information for the following reasons:

To help us provide a quality service and to assist you better in the future

To provide statistical information for research purposes (we will ensure you cannot be identified)

All recipients of sponsored firewood must be happy to write a testimonial about how this support has helped you, so that supporting businesses can verify that their sponsorship has an effect on local families. This can be posted or e-mailed to us.

The Kiwi Family Trust reserves the right to share information with appropriate agencies where there is evidence of serious risk of harm to client or someone else, or serious illegal activities are disclosed.

You have the right to see and correct your personal information that The Kiwi Family Trust has collected.

I confirm that the details provided are correct on this date and agree to the collection, storage and sharing of this information

**All savings are in an account with Kiwi Family Trust until April/May 2016. I understand that I cannot withdraw this money and that it cannot be used on anything but Firewood.**

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Have you or client heard of Kiwi Family Trust?                      Yes                      No

How did you or your client hear about Kiwi Family Trust?

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Can we assist you with any other services?

**Please tick preferred service/programme below**

- Budgeting Help
- Parenting Courses
- Youth Camps
- Mentoring – Individuals/Couples/Family/Youth
- Work Services
- Men Courses
- Life Skills Programme
- Advocacy
- Grandparents Raising Grandchildren & Families In Need
- Other \_\_\_\_\_

**THANK YOU FOR SAVING WITH US FOR NEXT YEARS FIREWOOD:** please circle below

How would you like to pay it?      Cash                      A/P      Other \_\_\_\_\_

**Kiwi Family Trust adds \$1.00 for every \$3.50 you save.**

Yes I wish to pay \$3.50 per week                            No I wish to pay another amount of \_\_\_\_\_     

**Firewood Savings Account: Kiwi Family Trust, National Bank, Papanui, 06-0821-0341144-06**  
**Please put your first and last name in as a reference when you set up an Automatic Payment.**

**INFORMATION OFFICE USE ONLY**

**Reason for Referral and Information:**

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**Signature** \_\_\_\_\_                      **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

Kiwi Family Trust  
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Firewood Savings Account: Kiwi Family Trust, National Bank, Papanui, 06-0821-0341144-06