



Armoury Information Centre

Auckland War Memorial Museum

Private Bag 92018, Auckland, New Zealand

Telephone 64 9 309 0443 Email armoury@aucklandmuseum.com

Thank you for contributing to the Armoury Information Centre's Cenotaph and Kitbag projects. By doing this you are helping us to preserve the memories and honour the lives of the many New Zealanders who served their country in times of conflict.

Please print neatly with a black or blue ballpoint pen only. Fill in only those details that are applicable or that you feel comfortable with.

1. Serviceman/Servicewoman's Surname:	2. Forenames:
3. Iwi:	4. Nickname/Alias:
5. Your relationship to this person: (e.g. wife, self, niece)	
6. Date of birth: (e.g. 5 May 1901)	7. Place of Birth:
8. Rank at Enlistment:	9. Last Rank Held:
10. Service Number:	11. Religion: (e.g. Roman Catholic)
12. Age at Enlistment: (e.g. 18 years)	13. Enlistment Date: (e.g. 14 July 1915)
14. Medical Information before Enlistment: (e.g. height, eye colour)	
15. Address before Enlistment: (e.g. name, street, suburb, town or city)	

16. Occupation before Enlistment:	
17. Next of Kin on Embarkation: (e.g. name and relationship, street, suburb, town or city)	
18. Unit, Squadron or Ship on Embarkation:	
19. Marital Status at Enlistment (include number of children, if any):	20. Embarkation Date: (e.g. 4 July 1941)
21. Transport on Embarkation and Type: (e.g. Tofua - ship)	
22. Place of Embarkation:	23. Destination of Initial Embarkation:
24. Other Units, Squadrons or Ships served with:	
25. Last Unit, Squadron or Ship served with:	
26. Previous Military Experience:	
27. Military Awards: (e.g. Military Cross, MC)	
28. Award Circumstances and Date:	

29. Service Medals and Decorations: (e.g. Victory Medal, Italy Star)	30. Campaigns:
31. Prisoner of War?	32. Date of Capture: (e.g. 11 May 1943)
<ul style="list-style-type: none"> • If Yes, go to number 32. • If No, go to number 39. 	
33. Location of Capture and by whom:	34. What action were you involved in prior to Capture: (e.g. bombing mission)
35. POW Serial Number:	36. POW Camps:
37. POW Total No. of Days Interned:	38. POW Liberation Date:
39. Discharge Date:	40. Discharge Reason: (e.g. end of war)
41. Hospitals, Wounds, Diseases and Illnesses (include dates, if known):	
42. Postwar Occupation/s:	
43. Biographical Notes: (e.g. family details, stories about the person, diary entries) Note: If you require more room, please continue making notes on a separate piece of paper and attach it to this form.	

44. Age at Death: (e.g. 27 years)	45. Date of Death:
46. Cause of Death:	47. Place of Death:
48. Death Notice and Date: (e.g. NZ Herald, 6 February 1944)	49. Name of Cemetery/Crematorium:
50. Grave Reference: (e.g. Block E, Row 11, Plot 44)	51. Cemetery Register Number:
52. Memorial Name and Text (if known):	

Submitting photographs, letters, diaries and other printed material

If you have any photos, letters, diaries or other war-related material that you would like to contribute to complement the above information, please allow us to add it to Cenotaph or Kitbag. We will scan it and send it back to you along with a copy of the finished record for your inspection.

Please note: The Museum Library would be happy to discuss the donation of any of the original items outlined above.

Photographs

Where possible, we would prefer the original photo or a good-quality reprint (**not** a photocopy) sent to us to scan. Please include as much information as you have on the photo or image (e.g. name/s, location, date, cemetery or memorial).

If you are using a digital camera to photograph a grave or memorial, please use the camera's highest resolution and send the image to us in JPEG and, if possible, TIFF file format.

Send the image/s to the following email address: armoury@aucklandmuseum.com

Letters, diaries and other printed material

Again, we would prefer the original to scan, but a good-quality photocopy would also be acceptable provided it is legible enough for us to transcribe.

Send this form to: **Armoury Information Centre
Auckland War Memorial Museum
Private Bag 92018
Auckland**

Please print your name and address:

