

Kaikohe's Memorial Park Reserve Management Plan



Submission form November 2025

Mama noa iho te whakapa mai! ***Making a submission is easy!***

You can also submit online at www.fndc.govt.nz/yoursay. Submitting online saves cost and time. If you need more space than is provided on this form, please feel free to write on extra pages. If you have extra information you would like council to consider, please attach it to your submission.

Please read through our consultation document available on our website: www.fndc.govt.nz/yoursay or in paper versions at any of our service centres or libraries. Other supporting information is available on our website.

About you

First name <i>(required)</i>	
Last name <i>(required)</i>	
Organisation and position in organisation <i>(If applicable)</i>	
Your email <i>(required)</i>	
Phone	

Which ward do you live in? *(Select 1 option)*

- | | |
|---|---|
| ☐ Te Hiku (North) | ☐ Bay of Islands-Whangaroa (East) |
| ☐ Kaikohe-Hokianga (West) | ☐ Outside Far North |

Would you like to be informed about future consultations via email?

- | | |
|---------------------------|--------------------------|
| ☐ Yes | ☐ No |
|---------------------------|--------------------------|

PRIVACY STATEMENT

Anyone is invited to submit feedback on this consultation, whether as an individual or on behalf of an organisation, however, any submissions that are out of scope, offensive, inappropriate, or late may not be accepted by the council. You will be notified if your decision is not accepted and, where appropriate, invited to resubmit. Any submissions made become part of the public consultation process. The collection and use of personal information by the Far North District Council is regulated by the Privacy Act 2020. Please note that your submission or a summary of your submission will be treated as public information and may be published on the council's website and made available to elected members and members of the public as part of the consultation process. Your name and contact details (phone number, email) will only be used for administrative purposes - such as the council contacting you to update you on the outcome of this consultation and letting you know about future consultations.

- ☐ **I have read the terms of this public consultation *(required)***

CONFIDENTIALITY

If you also wish your name to be treated as confidential, please confirm by ticking the box below. (NOTE: verbal submissions will be heard in an open Council meeting and cannot be treated as confidential).

- ☐ **Please keep my name confidential**

Please complete the question on the back

1. What parts of Kaikohe Memorial Park do you use for fun and recreation? (required)

Tick all that apply

☐	The playground or play equipment
☐	The skate bowl
☐	The basketball court
☐	The learn-to-ride cycle area
☐	Attending community events (e.g., Puanga–Matariki, Christmas in the Park)
☐	Spending time with friends or family (e.g., picnics, gatherings)
☐	Enjoying the artwork and cultural features
☐	Other (please specify below)

2. How often do you visit Kaikohe Memorial Park? (required)

Tick one option

☐	Weekly
☐	Monthly
☐	Occasionally
☐	Rarely
☐	Never

3. What do you most enjoy about the park? (required)

4. What improvements would make you use it more often? *(required)*

[illegible]

5. Do you have any further comments or suggestions for the reserve management plan you would like to share?

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight shadow on the right side, suggesting it's resting on a surface.

SUBMISSIONS CLOSE ON 14 DECEMBER 2025

