Mail to: Nassau County Board of Elections, 400 County Seat Drive, Mineola, NY 11501

# **New York State Voter Registration Form**

## You Can Use This Form To:

- · register to vote in New York State
- change your name and/or address, if there is a change since you last voted
- enroll in a political party or change your enrollment

### **To Register You Must:**

- be a U.S. citizen
- be 18 years old by December 31 of the year in which you file this form (note: you must be 18 years old by the date of the general, primary or other election in which you want to vote).
- not be in jail or on parole for a felony conviction
- not claim the right to vote elsewhere

Información en español: si le interesa obtener este formulario en español, llame al 1-800-367-8683

中文資料:如果你有興趣索取本中文資料 表格,請電 1-800-367-8683

I Yes. I need an application for an Absentee Ballot

## **To Complete This Form:**

Fill in all the boxes that apply to you.

Box 4: Give your home address.

Box 5: Give your mailing address if it is different from your home address (post office box no., star route or rural route no., etc.)

Box 7: The completion of this box is optional.

Box 9: If you have never voted before, write "None." If you can't remember when you last voted, put a question mark (?). If you voted before under a different name, put down that name. If not, write "Same."

Box 10: Check one box only.

Box 11: This application must be signed and dated in ink.

If you will need an application for an Absentee Ballot or would like to be an Election Day Worker, please check below.

Please print or type in blue or black ink

#### Deadline Information:

You can register in person at your county board of elections on any business day, except election day. If you want to vote in an election, you must mail or deliver this form to your county board of elections no later than 25 days before the election in which you want to vote. Your eligibility to vote will be based on the date you file this form, and your county board will notify you of your eligibility.

Vote

New York

#### **Need More Registration Forms?**

You can get registration forms at most state agency offices and post offices or at any county board of elections.

#### **Questions?**

Call your county board of elections. Find the phone number on the other side of this form. Or call 1-800-FOR-VOTE Hearing impaired people with TDD may call 1-800-533-8683. Or visit our website www.elections.state.ny.us

TYes. I would like to be an Election Day Worker

MREG(6/00)

1	Check boxes that apply: <ul> <li>new registration and enrollment</li> <li>address change</li> <li>party enrollment change</li> <li>name change</li> </ul> Last Name       First Name	12	f you a		tizen? Yes O, do not complete Suffix		0	oard Use Only	
3 4	Address Where You Live (do not give P.O. address) Apt. No. Uity/lown/Village						Zip Code County		
5	Address Where You Get Your Mail (if different from above)     P.O. box, star rte., etc.     Post Office     Zip Code								Zip Code
6	Date of Birth ,	7	Sex (circle) M F 8				el. Number (optional		
9	The lk x year you voted Your Address was (give house number, street, and city) In cou						Under t	he name (it different	from your name now)
10	Choose a Party — Check one box only  REPUBLICAN PARTY  DEMOCRATIC PARTY CINDEPENDENCE PARTY CINDEPENDENCE PARTY CINDERAL PARTY	ote v u	11	• I am • I wil • This • The fined	is my signature of	Jnite e cou or ma on is d/or	States. ity, city, or k on the lin ue. I unders	e below. stand that if it is no	30 days before the election. t true I can be convicted and ] Date

do not write in this space