Register to vote
With this form, you register to vote in elections in New York State. You can also use this form to:
• change the name or address on your voter registration
• become a member of a political party
• change your party membership
• pre-register to vote if you are 16 or 17 years of age

To register you must:
• be a U.S. citizen
• be a U.S. citizen
• 18 years or older on or before election day
• not be in prison for a felony conviction
• not claim the right to vote elsewhere
• not found to be incompetent by a court.

Questions?
Call your County Board of Elections
listed on the back of this form or
1-800-FOR-VOTE (TD/TTY Dial 711)
Find answers or tools on our website
www.elections.ny.gov

Verification of identity
We'll try to check your identity before Election Day, through the DMV number (driver’s license number or non-driver ID number), or the last four digits of your social security number, which you'll fill in below.
If you do not have a DMV or social security number, you may use a valid photo ID, a current utility bill, bank statement, paycheck, government check or some other government document that shows your name and address. You may include a copy of one of those types of ID with this form—be sure to tape the sides of the form closed.
If we are unable to verify your identity before Election Day, you will be asked for ID when you vote for the first time.

It is a crime to procure a false registration or to furnish false information to the Board of Elections. Please print in blue or black ink.

Qualifications
1. Are you a citizen of the U.S.?
   Yes ☐ No ☐

2. A) Will you be 18 years of age or older on or before election day?
   Yes ☐ No ☐

   B) Are you at least 16 years of age and understand that you must be 18 years of age or on or before election day to vote, and that until you will be eighteen years of age at the time of such election your registration will be marked “pending” and you will be unable to cast a ballot in any election?
   Yes ☐ No ☐

Your name
3. First name
4. Last name

More information
4. Birth date

5. Gender

6. Phone

7. Email

The address where you live
8. Address (not P.O. box)

9. City/Town/Village

New York State County

The address where you receive mail
8. Address or P.O. box

9. P.O. Box

City/Town/Village

Voting history
10. Have you voted before?
   Yes ☐ No ☐

11. What year?

Voting information that has changed
12. Your name was

13. Your address was

14. Your previous state or New York State County was

Identification
13. New York State DMV number

14. Last four digits of your Social Security number

15. I do not have a New York State driver’s license or a Social Security number.

Political party
14. I wish to enroll in a political party

15. I do not want to enroll in any political party and wish to be an independent voter

16. No party

Optional questions
15. I need to apply for an Absentee ballot.

16. I would like to be an Election Day worker.

Affidavit: I swear or affirm that
• I am a citizen of the United States.
• I will have lived in the county, city or village for at least 30 days before the election.
• I meet all requirements to register to vote in New York State.
• This is my signature or mark in the box below.
• The above information is true, I understand that if it is not true, I can be convicted and fined up to $5,000 and/or jailed for up to four years.

Sign

Date
Before mailing, remove tape, fold and seal.