

Voter Registration Application

Before completing this form, review the General, Application, and State specific instructions.

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|---|---|---------------------------------|---|---|---------------------------------|----------|
| Are you a citizen of the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No Will you be 18 years old on or before election day? <input type="checkbox"/> Yes <input type="checkbox"/> No If you checked "No" in response to either of these questions, do not complete form. (Please see state-specific instructions for rules regarding eligibility to register prior to age 18.) | | This space for office use only. | | | | |
| 1 | (Circle one) Mr. Mrs. Miss Ms. | Last Name | First Name | Middle Name(s) | (Circle one) Jr Sr II III IV | |
| 2 | Home Address | | Apt. or Lot # | City/Town | State | Zip Code |
| 3 | Address Where You Get Your Mail If Different From Above | | | City/Town | State | Zip Code |
| 4 | Date of Birth ____/____/____ Month Day Year | 5 | Telephone Number (optional) | 6 ID Number - (See item 6 in the instructions for your state) | | |
| 7 | Choice of Party (see item 7 in the instructions for your State) | 8 | Race or Ethnic Group (see item 8 in the instructions for your State) | | | |
| 9 | I have reviewed my state's instructions and I swear/affirm that: <input type="checkbox"/> I am a United States citizen <input type="checkbox"/> I meet the eligibility requirements of my state and subscribe to any oath required. <input type="checkbox"/> The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be fined, imprisoned, or (if not a U.S. citizen) deported from or refused entry to the United States. | | | Please sign full name (or put mark) ^ _____ Date: _____ Month Day Year | | |

If you are registering to vote for the first time, please refer to the application instructions for information on submitting copies of valid identification documents with this form.

Please fill out the sections below if they apply to you.

If this application is for a change of name, what was your name before you changed it?

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|----------|-------------------|-----------|------------|----------------|---------------------------------|
| A | Mr. Mrs. Miss Ms. | Last Name | First Name | Middle Name(s) | (Circle one) Jr Sr II III IV |
|----------|-------------------|-----------|------------|----------------|---------------------------------|

If you were registered before but this is the first time you are registering from the address in Box 2, what was your address where you were registered before?

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|----------|----------------------------------|---------------|------------------|-------|----------|
| B | Street (or route and box number) | Apt. or Lot # | City/Town/County | State | Zip Code |
|----------|----------------------------------|---------------|------------------|-------|----------|

If you live in a rural area but do not have a street number, or if you have no address, please show on the map where you live.

| | | | | | | | | | | | |
|-----------------|--|-----------------|----------|-----------------|--|--|----------------|-----------------|--|---|--|
| C | <ul style="list-style-type: none"> Write in the names of the crossroads (or streets) nearest to where you live. Draw an X to show where you live. Use a dot to show any schools, churches, stores, or other landmarks near where you live, and write the name of the landmark. | NORTH ↑ | | | | | | | | | |
| | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Example</td> <td style="width: 10%; text-align: center;">Route #2</td> <td style="width: 60%; text-align: center;">● Grocery Store</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">Woodchuck Road</td> </tr> <tr> <td style="text-align: center;">Public School ●</td> <td></td> <td style="text-align: center;">X</td> </tr> </table> | Example | Route #2 | ● Grocery Store | | | Woodchuck Road | Public School ● | | X | |
| Example | Route #2 | ● Grocery Store | | | | | | | | | |
| | | Woodchuck Road | | | | | | | | | |
| Public School ● | | X | | | | | | | | | |

If the applicant is unable to sign, who helped the applicant fill out this application? Give name, address and phone number (phone number optional).

| | |
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| D | |
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Mail this application to the address provided for your State.

STATE SPECIFIC INSTRUCTIONS

Massachusetts

Registration Deadline: 20 Days before the election.

6. ID Number. Federal law requires that you provide your driver's license number to register to vote. If you do not have a current and valid Massachusetts' driver's license then you must provide the last four (4) digits of your social security number. If you have neither, you must write "NONE" in the box and a unique identifying number will be assigned to you. You may be asked to provide acceptable ID.

7. Choice of Party. There are three political parties in Massachusetts:

Democratic Party (D) (617) 939-0800

Republican Party (R) (617) 523-5005

Green-Rainbow (J) (617) 418-3756

If you enroll in any of these parties you may vote only in that party's primary. Enrollment in a political party does not affect your right to vote in the general election. In the general election, all voters receive the same ballot and vote for the candidate of their choice, regardless of party enrollment.

Choosing No Enrollment in a Political Party: If you do not wish to enroll in a party, write Unenrolled on the voter registration form.

If you do not enroll in a party, you may still vote in state and presidential primaries by choosing a party ballot and will remain unenrolled, which is commonly referred to as "independent".

Choosing To Enroll in a Political Designation: In addition to the three "political parties" listed above, there are certain legal political designations in which you can enroll. If you enroll in any political designation you may not vote in any state or presidential primary.

8. Race or Ethnic Group. Leave Blank

9. Signature. To register in Massachusetts you must:

- Be a citizen of the United States
- Be a resident of Massachusetts
- Be 18 years old on or before the next election
- Not have been convicted of corrupt practices in respect to elections
- Not be under guardianship with respect to voting
- Not be currently incarcerated for a felony conviction

Local Mailing Address:

Town Clerk's Office

1009 Main Street

Tewksbury, MA 01876