

# Pennsylvania Voter Registration Application

**Print your name** 1

Last name \_\_\_\_\_ Jr Sr II III IV (circle if applicable)

First name \_\_\_\_\_ Middle name or initial \_\_\_\_\_

**Eligibility** 2

If you answer "No" to either question, you cannot register to vote.

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

Will you be 18 years or older on or before election day?  Yes  No

**Reason** 3

New registration  Change of name  Change of address

Change of party  Federal or State employee registering in county of last residence

**About you** 4

Phone and email are optional and used if information is missing on this form.

Birth date  |  |  |  |  |  |  |  | Sex  M  F Race (optional) \_\_\_\_\_

Phone  |  |  |  |  |  |  |  | Email \_\_\_\_\_

**Your address** 5

If you do not have a street address or a permanent residence, or are a student, see the instructions.

Address (not P.O. Box) \_\_\_\_\_ Apt. number \_\_\_\_\_

City/Town \_\_\_\_\_ State PA Zip Code \_\_\_\_\_

Municipality \_\_\_\_\_ County \_\_\_\_\_

I do not have a street address or permanent residence (use map on back)

**The address where you receive mail** 6

Same as above  Address or P.O. Box \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Identification** 7

If you have a PennDOT number you must use it. If not please provide the last four digits of your Social Security number. See *Verifying your identity*.

PA driver's license or PennDOT ID card number \_\_\_\_\_

Last four digits of your Social Security number X X X - X X - \_\_\_\_\_

I do not have a PA driver's license or a PennDOT ID card or a Social Security number.

**Political party** 8

To vote in a primary, you must register with either the Democratic or Republican party.

Democratic  Republican  Other: \_\_\_\_\_  (None) No Affiliation

**Voting assistance** 9

I require help to vote. I need this kind of assistance: \_\_\_\_\_

I require language help. My preferred language is: \_\_\_\_\_

**If your name or address has changed** 10

Skip if this is the first time you are registering to vote.

Name on previous registration \_\_\_\_\_

Full previous address and county \_\_\_\_\_

PA Voter No. (if available) \_\_\_\_\_ Year \_\_\_\_\_

**Declaration** 11

**I declare that:**

- I am a United States citizen and will have been a citizen for at least 30 days on the day of the next election.
- I will be at least 18 years old on the day of the next election.
- I will have lived at the same address in Section 5 for at least 30 days before the election.
- I am legally qualified to vote.

I affirm that this information is true. I understand that this declaration is the same as an affidavit, and, if this information is not true, I can be convicted of perjury, and fined up to \$15,000, jailed for up to seven years, or both.

**Signature or mark** \_\_\_\_\_

**Print name** \_\_\_\_\_

**Today's date**  |  |  |  |  |  |  |  |

**Help with this form** 12

Fill in if someone helped you with this form or witnessed you make a mark for your signature.

Name of assistant \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Signature of assistant \_\_\_\_\_