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

To register you must:
• be a US citizen
• be 18 years old by the end of this year
• not be in prison or on parole for a felony conviction;
• not claim the right to vote elsewhere.

It is a crime to procure a false registration or to furnish false information to the Board of Elections.

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

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

Verify your 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.

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

Sign
Date

Political party
You must make 1 selection
Political party enrollment is optional but that, in order to vote in a primary election of a political party, a voter must enroll in that political party, unless state party rules allow otherwise.

I wish to enroll in a political party
☐ Democratic party ☐ Republican party
☐ Conservative party ☐ Green party
☐ Working Families party ☐ Independence party
☐ Women’s Equality party ☐ Reform party
☐ Other ☐ No party

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.

Optional questions
15 I need to apply for an Absentee ballot.
☐ I would like to be an Election Day worker.

Please print in blue or black ink.
If you would like to be an organ and tissue donor, you may enroll in the NYS Department of Health (DOH) Donate Life Registry online at www.nyhealth.gov or provide your name and address below.

You receive a confirmation letter from DOH, which will also provide you an opportunity to limit your donation.

By signing below, you certify that you are:

- 18 years of age or older;
- consenting to donate all of your organs and tissues for transplantation, research, or both;
- authorizing the Board of Elections to provide your name and identifying information to DOH for enrollment in the Registry;
- authorizing DOH to allow access to this information to federally regulated organ procurement organizations and NYS-licensed tissue and eye banks and hospitals upon your death.

**Register to donate your organs and tissues**

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