

New Jersey Voter Registration Application Please print clearly in ink. All information is required unless marked optional.

1	Check all boxes that apply:	□ Name Change□ Political Party Affiliation□ Signature Update□ Vote By Mail					R OFFICIAL USE ONLY					
2	Are you a U.S. Citizen? ☐ Yes ☐ No (If No, DO NOT complete this form) Are you at least 17 years of age? ☐ Yes ☐ No (If No, DO NOT complete this form)									Cler	rk	
4	Last Name		First I	Name		Middle N	ame or Initial	Suffix	(Jr., Sr., III)	Reg	jistration #	
5	Date of Birth (MM / DD / YYYY)	/	/		6 Gender	(Optiona	<i>I)</i> □ Female	☐ Male	:	Offic	ce Time Stamp	
7	NJ Driver's License Number or I	If you DO NOT have a NJ Driver's License or MVC Non-Driver										
	ID, provide the last 4 digits of your Social Security Number.											
	☐ "I swear or affirm that I DO NOT have a NJ Driver's Licer Home Address (DO NOT use PO Box) Apt.					nse, MVC Non-driver ID or a Social Security Number." Municipality (City/Town) County State Zip Code						
8	Home Address (DO NOT use	- O BOX)		Αρι.	ividinoipanty (City/ IOWII)	County	Otato	Zip Gode			
9	Mailing Address (If different from Home Address)			Apt.	Municipality	'City/Town)	County		Zip Code	□ in person		
10	Last Address Registered to Vo	te (DO NOT use l	PO Box)	Apt.	Municipality	City/Town)	County	State	Zip Code	Mur	ni Code #	
11 Former Name if Making Name Change 12 Day Phone Number (Optional)									Part	ty		
					E-Mail Address	(Optiona	I)			War	rd	
13	13 Do you wish to declare a political party affiliation? ☐ Yes, the party name is									— - · Dist	· District	
	(Optional) □ No, I do not wish to be affiliated with any political party.											
14 Request for Mail-In Ballot for all future elections (<i>Optional</i>) ☐ I wish to receive a Mail-In Ballot for all future elections until I request otherwise in writing to the County Clerk's office. ☐ Mail my ballot to the following address if different from Mailing Address above.												
	Mailing Address if different	from above				Apt.	Municipality	(City/Tov	vn) S	State	Zip Code	
• I	am a U.S. Citizen live at the above home address am at least 17 years old, and u that I may not vote until reaching	s nderstand	a ● I a a o	t least 36 am not s s the res ffense u	e resided in the S 0 days before the erving a senten sult of a conviction der the laws of f the United Sta	e next elect ce of incard on of any ir this or and	etion i ceration f ndictable i	registration		ect me to nent up	o a fine of up to 5 years, or	
Signature of Registrant: Sign or mark and date on lines below If applicant is unable to complete this for name and address of individual who complete the second s												
						Name				•		
							Date (MM/DD/YYYY)/					
X				Da	te / /	Add	dress					
7) 8) 13)	Registrants who are submitting required by section 7, or the photo ID, or a document with Note: ID Numbers are Contillegally shall be subject to a lifyou are homeless, you may declare a political previously affiliated voter was 55 days before the primary the acceptance of your vote If you wish to receive a Mail Mail-In Ballots for all future and More Information? Clark Control of the primary control of the primary that is the submitted of the primary that is the	ng this form be information in your name idential and wriminal penal ay complete party affiliation wants to delection in our registration. I-In Ballot for elections unineck boxes.	y mail you pr and continuous protection or you change refer to a applicable to a continuous belo accessored ac	and are ovide current at be released to the political ovote in cation. The cation is the political ovote in cation is the political ovote in cation.	e registering to annot be verificed dress on it to eased by any good providing a copy declare to be all party affiliated the primary extions, mark the totherwise in the would like the color of the col	vote for the ed, you wi avoid hav overnmen e unaffiliat ion or becelection. Co ne approp writing to e to rece oting if you	Il be asked to pring to provide atal agency. And to r the location ed, regardless come unaffiliate ompleting securiate box in sequence of the county County County County County and have a disal	orovide identificate person where of any ed, you tion 13 ction 14 cterk's of format	a COPY of attion at the n who uses by you spend prior party a must file this OPTION. You will conflice. Lion about	a curre polling such r I most affiliation is form AL and continued:	ent and valid g place. numbers of your time. on. If you are a n no later than I will not affect	
	☐ becoming a poll worker NJ Division of Elections - 01/09/20	⊔ available	election	on mate	erials in this al	ernative l	anguage:					

New Jersey Voter Registration Information

You can register to vote if:

- You are a United States citizen.
- You are at least 17 years of age.*
- You will be a resident of the State and county 30 days before the election.
- I am not serving a sentence of incarceration as the result of a conviction of any indictable offense under the laws of this or another state or of the United States.
- *You may register to vote if you are at least 17 years old but cannot vote until reaching the age of 18.

Registration Deadline: 21 days before an election

Your County Commissioner of Registration will notify you if your application is accepted. If it is not accepted, you will be notified on how to complete and/or correct the application.

Questions? visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

1 FOLD



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL FIRST-CLASS MAIL PERMIT NO. 206 TRENTON, NJ

POSTAGE WILL BE PAID BY ADDRESSEE

CAMDEN COUNTY BOARD OF ELECTIONS

100 UNIVERSITY COURT

PO BOX 158

BLACKWOOD NJ 08012-9804

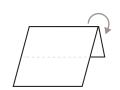
-լիգերգիլայիորիեսայրենիլովիիիկիիների

2 FOLD

Important: Print out at 100% - DO NOT REDUCE. Fold as illustrated to ensure proper mailing.



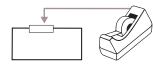
Put both pages together as shown



fold top down



2 fold bottom up



3 Tape top shut