Registration Deadline: Wed, October 13th!

Print all information in black ink. Follow above instructions for proper telicory.					
1	Check one: Are you a Citizen of the United States of An	merica 🗌 Yes 🔲 No	NOTE: If you checked "no," do no	ot complete this form.	
2	Full name: last name	first name	middle name or initial	Jr. Sr. II III IV (ctrcle one tf appropriate)	
3	Former name: last name	first name	middle name or initial	Jr. Sr. II III IV (ctrcle one tf appropriate)	
4	Address where you live now (street number / street name / rural route number & box number / apartment number / city or town / zip code):				
5	Address where you receive all your mail (if different from #4):				
6	Date of birth: month day year 7 Identification	#: license # or last 4 digits of S	xw 8 Telephone (optional):	Check if unlisted	$\frac{1}{1}$ if
9	Party enrollment or designation (check one): Democratic Republican Green-Rainbow Libertarian				
	□ No Party (unenrolled) □ Political Designation (not a political party):				0
10	Address at which you were last registered to vote (street number / street name / rural route number & box number / apartment number / city or town / ztp code):				
11	If the applicant is unable to sign this form, give the name, address and telephone number (optional) of the person helping the applicant: **name** name** telephone number (optional) **The applicant is unable to sign this form, give the name, address and telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping the applicant: **name** telephone number (optional) of the person helping telephone number (optional) of the perso				
12	I hereby swear (affirm) that I am the person named above, that the above information is true, that I AM A CITIZEN OF THE UNITED STATES, that I am at least 16 years old and I understand that I must be 18 years old to be eligible to vote, that I am not a person under a guardianship which prohibits my registering to vote, that I am not temporarily or permanently disqualified by law from voting because of corrupt practices in respect to elections, that I am not currently incarcerated for a felony conviction, and that I consider this residence to be my home. Signed under the penalty of perjury.				
13	Today's date: month day year 14 Signed: signed:	gn your name bere.	4		

This box is small – don't forget to check it!

Your address in MA (dorm, etc.)

Can only use license # if it's an MA license, otherwise use SSN

Only if you had a previous address in MA

Make sure to sign the form!