

Massachusetts Official Mail-In Voter Registration Form

How to use this form

1. Check all the boxes that apply to you.
2. Print your name: last name, first name, middle name or initial.
3. Print your former name, if applicable.
4. Print the address where you live now: number and street name or rural route number and box number (do not provide a post office box number), apartment number, city or town and full zip code. Use the map[†] at right if you cannot otherwise identify your address.
5. Print the address where you receive all your mail, if it is different from the address entered on #4.
6. Print your date of birth: month, day and year.
7. 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, you must provide the last four digits of your social security number. If you have neither, you must write "none" in the box.
8. It is optional to provide your telephone number. If you include your telephone number and do not check "unlisted" it will be a public record.
9. Check a party, 'no party' or print a political designation (not a party).
10. Print the address where you were last registered to vote.
11. If a person is helping you because you are physically unable to sign this form, that assisting person must print his or her name and address and has the option to print his or her telephone number.
12. Read the oath.
13. Print today's date.
14. Sign your name.

This form may be mailed or hand-delivered to your city or town hall. If mailed, fold the form, tape it closed, place a first class stamp on it, print your city or town name and zip code for that city or town hall and drop into any mailbox.



*William Francis Galvin
Secretary of the Commonwealth*

You can use this form to:

- register to vote in Massachusetts; and/or
- change your name or address for voter registration only; and/or
- join a party, change from one party to another or leave a party.

To register to vote in Massachusetts you must:

- **BE A U.S. CITIZEN;** and
- be a Massachusetts resident; and
- be at least 18 years old on or before the next election.

Penalty for Illegal Registration: Fine of not more than \$10,000 or imprisonment for not more than five years or both.
-Massachusetts General Laws, chapter 56 section 8.

Identification To Be Provided

Section 7 requires you to include your driver's license number or the last 4 digits of your social security number on this application. This information will be verified through the Registry of Motor Vehicles and the Commissioner of Social Security. If the information cannot be verified or you do not provide this information, you must provide identification either with this application or at your polling location when you go to vote. Sufficient identification includes a copy of a current and valid photo identification, current utility bill, bank statement, government check, paycheck or other government document showing your name and address.

| | | | |
|-------|--|-------|--|
| north | | | |
| west | | east | |
| | | south | |

[†]Using landmarks, draw the location of the place where you live if you cannot describe that location as a number and street or as a rural route and box number.

Follow the instructions listed above for proper delivery.

| | | | | |
|-----------|--|-------------------------|---|--|
| 1 | Check all that apply: Are you a Citizen of the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No Will you be 18 years of age or older on or before Election Day? <input type="checkbox"/> Yes <input type="checkbox"/> No NOTE: If you checked "no" to either of these questions, do not complete this form. | | | |
| 2 | Full name: | <i>last name</i> | <i>first name</i> | <i>middle name or initial</i> |
| | <i>Miss Ms. Mrs. Mr.</i> | | | <i>Jr. Sr. II III IV (circle one if appropriate)</i> |
| 3 | Former name (if applicable): | <i>last name</i> | <i>first name</i> | <i>middle name or initial</i> |
| | <i>Miss Ms. Mrs. Mr.</i> | | | <i>Jr. Sr. II III IV (circle one if appropriate)</i> |
| 4 | Address where you live now (street number, street name, rural route number and box number): | | | |
| | <i>street number / street name / rural route number and box number</i> | <i>apartment number</i> | <i>city or town</i> | <i>zip code + 4-digit</i> |
| 5 | Address where you receive all your mail (if different from #4): | | | |
| | <i>street number / street name / rural route number and box number</i> | <i>apartment number</i> | <i>city or town</i> | <i>zip code + 4-digit</i> |
| 6 | Date of birth: | 7 | Identification #: | 8 |
| | <i>month day year</i> | | <i>MA license # or last 4 digits of your SS #</i> | Telephone (optional): <input type="checkbox"/> <i>Check if unlisted</i> |
| | | | | () - |
| 9 | Party enrollment or designation (check one): <input type="checkbox"/> <i>Democratic</i> <input type="checkbox"/> <i>Republican</i> <input type="checkbox"/> <i>Green-Rainbow</i> <input type="checkbox"/> <i>No Party (unenrolled)</i> <input type="checkbox"/> <i>Political Designation (not a political party):</i> | | | |
| 10 | Address at which you were last registered to vote: | | | |
| | <i>street number / street name / rural route number and box number / post office box</i> | <i>apartment number</i> | <i>city or town</i> | <i>state zip code + 4-digit</i> |
| 11 | If the applicant is unable to sign this form, give the name, address and telephone number (optional) of the person helping the applicant: | | | |
| | <i>name</i> | <i>address</i> | <i>telephone number (optional)</i> | |
| 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 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: | 14 | Signed: | |
| | <i>month day year</i> | | <i>Sign your name here.</i> | |

This form must be received by the local Board of Registrars or Election Commission or postmarked on or before the deadline for voter registration (listed below) for that election, primary, preliminary or town meeting.

DEADLINES FOR VOTER REGISTRATION

Check to make sure that you have completed all the information on the voter registration affidavit on the opposite side!

| To participate in... | You must register... |
|-----------------------------------|-------------------------|
| state primaries | at least 20 days before |
| state elections | |
| city and town preliminaries | |
| city and town elections | |
| regularly scheduled town meetings | at least 10 days before |
| special town meetings | |

If you do not hear from your local election officials in 2 or 3 weeks, please call them!

Fold along dotted line.

Return Address

name

number and street

MA

city or town *zip code*



| |
|--------------------|
| <i>Place</i> |
| <i>First Class</i> |
| <i>Stamp Here</i> |

Board of Registrars or Election Commission

City or Town Hall

MA

YOUR CITY OR TOWN

ZIP CODE FOR CITY OR TOWN HALL