

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

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	Check boxes ☐ New Registration ☐ Address Change ☐ Political Party Affiliation that apply: ☐ Name Change ☐ Signature Update ☐ Or Non-affiliation Change									FOR OFFICIAL USE ONLY	
	Are you a U.S. Citizen?									Clerk	
3	Last Name		First	Name	M	iddle 1	Name or Initial	Suffix	(Jr., Sr., III)	Registration #	
4	Date of Birth Office Time Starr										
5	NJ Driver's License Number or MVC Non-driver ID Number 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 License, MVC Non-driver ID or a Social Security Number."										
6		CSS (DO NOT use PO Box)			Municipality		County		Zip Code	1	
7	Mailing Address if different from above			Apt.	Municipality		County	State	Zip Code	[
8	Last Address	s Registered to Vote (ролютия	:POBox)	Apt.	Municipality	-	County	State	Zip Code	□ by mail □ in person	
Former Name if Making Name Change											
a. Day Phone Number (Optional)											
b. E-Mail Address (Optional)											
10 Do you wish to declare a political party affiliation? ☐ Yes, the party name is ☐ No, I do not wish to be affiliated with any political party.											
11	Gender □ Female □ Male □ Male □ Declaration - I swear or affirm that:										
Signature: Sign or mark and date on lines below						nam	If applicant is unable to complete this form, print the name and address of individual who completed this for				
					Date						
X	Da			Date		Address					
Important Instructions for sections 5, 6 and 10 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information required by section 5, or the information you provide cannot be verified, you will be asked to provide a COPY of a current and valid photo ID, or a document with your name and current address on it to avoid having to provide identification at the polling place. Note: ID Numbers are Confidential and will not be released by any governmental agency. Any person who uses such numbers											
C)	illegally shall be subject to criminal penalties.										
 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time. 10) You may declare a political party affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. If you are a previously affiliated voter who wants to change political party affiliation or become unaffiliated, you must file this form no later than 55 days before the primary election in order to vote in the primary election. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application. 											
Nee	d More Inf	ormation? Check boxe	s bel	ow if you	would like to	receiv	e more inform	ation a	bout:		
	□ voting by m □ becoming a		□ v	oting if yo	ce accessibility ou have a disab visual impairme	ility,			ailable elections alternative	on materials in language:	



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.
- You are **NOT** currently serving a sentence, probation or parole because of a felony conviction.
- *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)



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

BURLINGTON COUNTY COMMISSIONER OF REGISTRATION PO BOX 6000 MOUNT HOLLY NJ 08060-9908



Fold as illustrated to ensure proper mailing.







