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
• pre-register to vote if you are 16 or 17 years of age

To register you must:
• be a US citizen,
• be 18 years old (you may pre-register at 16 or 17 but cannot vote until you are 18),
• not be in prison for a felony conviction,
• not claim the right to vote elsewhere,
• not be found to be incompetent by a court.

To enroll in a political party, a voter must vote in a primary election of that political party, a political party, a voter must enroll in that political party, unless state party rules allow otherwise.

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

Questions?

Are you a citizen of the U.S.? ☐ Yes ☐ No
If you answer No, you cannot register to vote.

Are you at least 16 years of age and understand that you must be 18 years of age on or before election day to vote, and that until you will be eighteen years of age at the time of such election your registration will be marked “pending” and you will be unable to cast a ballot in any election?

Are you a New York State driver or a Social Security number.

Are you a New York State driver’s license or a Social Security number.

Are you at least 16 years of age and understand that you must be 18 years of age on or before election day to vote, and that until you will be eighteen years of age at the time of such election your registration will be marked “pending” and you will be unable to cast a ballot in any election?

If you answer No to both of the prior questions, you cannot register to vote.

Your name
3 Last name ☐ Tubman ☐ Suffix
First name ☐ Harriet ☐ Middle Initial

More information
4 Birth date 1 2 3 4 / 5 6 7 8 Gender ☐ Male ☐ Female
Optional
Optional

The address where you live
8 Address (not P.O. box) 123 Main Street
Apt. Number ☐ My Hometown
City/Town/Village ☐ County!!!
New York State County

The address where you receive mail
9 Address or P.O. box
P.O. Box ☐ City/Town/Village

Voting history
10 Have you voted before? ☐ Yes ☐ No
11 What year? ☐

Voting information that has changed
Skip if this has not changed or you have not voted before.

Identification
You must make 1 selection
For questions, please refer to Verifying your identity above.

Optional, but ... 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.

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

Verifying 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.

If we are unable to verify your identity before Election Day, you will be asked for ID when you vote for the first time.

Students going away to college must decide if they wish to vote in their college town or their hometown.

If they receive mail at a P. O. Box e.g., a student who lives away but will come home to vote OR

If yes, then one of these has changed or party affiliation (see below)

If we are unable to verify your identity before Election Day, you will be asked for ID when you vote for the first time.

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.

Be sure the form is signed
Be sure the form is dated
By signing below, you certify that you are:
16 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 NYS DonateLife™ Registry for enrollment;
and authorizing the Registry to give access to this information to federally regulated organ procurement organizations and NYS-licensed tissue and eye banks and others approved by the NYS Commissioner of Health upon your death.