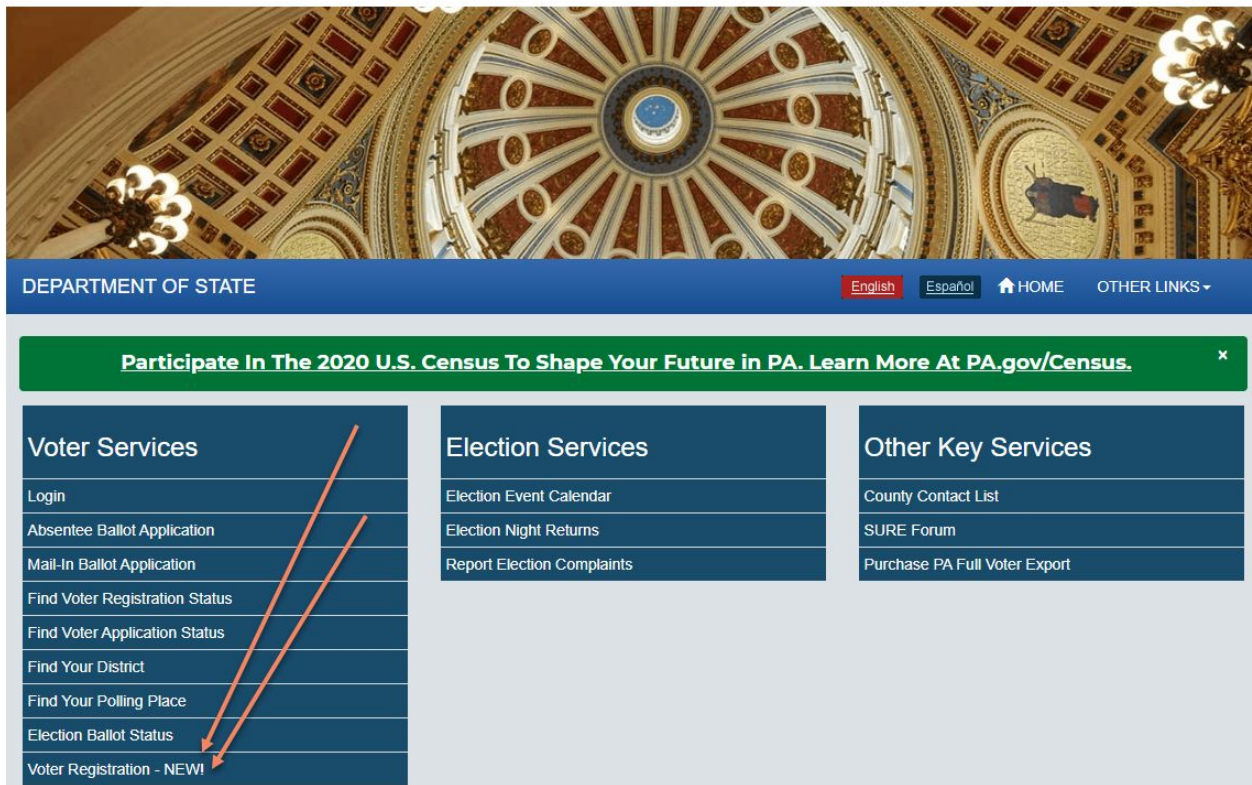


**League of Women Voters  
Central Delaware County  
Exercise Your Right to Vote  
Register Online Today through [VotesPA.com](http://VotesPA.com)**

Step 1. Key in the URL: [www.votespa.com](http://www.votespa.com) and click on **Register to Vote**



Below is displayed the Registration screen. Examine these questions to see the information required to complete the application online at VotesPA.

## Step 2. Online you will complete questions 1 – 8,11, & 13. (Questions 9-10, 12, 14 are optional.)

**1. Your Name**

**First Name**

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**Middle Name/Initial**

---

**Last Name**

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**Suffix**

### 2. Eligibility \*

If you answer "No" to either question, you cannot register to vote.

#### To register you must:

- Be a **United States citizen** at least 30 days before the next election
- Be a **resident of Pennsylvania** and your election district for at least 30 days before the next election
- Be **at least 18 years of age** on the day of the next election

#### Are you a citizen of the U.S.?

Yes       No

#### Will you be 18 years or older on or before election day?

Yes       No

### 3. Reason \*

If you are currently registered to vote, you do not have to use this application unless you have moved or changed your name.

Please check at least one box.

- New Registration
- Change of Name
- Change of Address If you have recently moved to Pennsylvania from another state, you must submit a new registration rather than a change of address.
- Change of Party
- Federal or State employee registering in county of last residence.

### 4. About you

**Birth Date (mm/dd/yyyy)**

#### Sex

Female    Male

**Race (optional)**

Phone and email are optional, and used if information is missing on this form

**Phone**

**Email****5. Your address**

Enter the address of your residence. You may not use a P. O. Box address.

If you live in a rural area or are homeless and do not have a street address or a permanent residence, please use the link at the top of the page to print a blank voter registration application, use the map on the printed form to show where you live or spend most of your time, and mail it to your county voter registration office.

**Street Address****Street Address 2****Unit type (if applicable)****Unit number (if applicable)****City****Zip Code Ex: 12345**

I do not have a street address or permanent residence.

**County where you live****Municipality where you live****6. The address where you receive mail**

Skip if the same as your residence address above.

**Mailing Address****Mailing City****Mailing State****Mailing Zip Code (Ex. 12345 or 12345-6789)****7. Identification\***

If you have a PA driver's license or PennDOT ID card number, you must use it.

**PA driver's license or PennDOT ID card number**

If you do not have a PennDOT number please enter the last 4 digits of your Social Security number

I do not have a PA driver's license or PennDOT ID card or a Social Security number.

### 8. Political party

To vote in a primary, you must register with either the Democratic or Republican party.

- Democratic
- Republican
- Green
- Libertarian
- None (No Affiliation)
- Other

### 9. Voting assistance

(Optional) If you require assistance with voting, complete this section.

Do you require help to vote?

- Yes
- No

### 10. Voting information that has changed

Skip if this information has not changed or if this is the first time you are registering to vote.

For change of address, include street, city, state, and zip code of your previous address.

### 11. Declaration

I declare that

- I am a United States citizen and will have been a citizen for at least 1 month on the day of the next election.
- I will be at least 18 years old on the day of the next election.
- I will have lived at the address in section 5 for at least 30 days before the election.
- I am legally qualified to vote.

I affirm that this information is true. I understand that this declaration is the same as an affidavit, and, if this information is not true, I can be convicted of perjury, and fined up to \$15,000, jailed for up to 7 years, or both.

### 12. Help with this form

If someone helped you with this form, fill in the information in this section

**Name of person who assisted in the completion of this application**

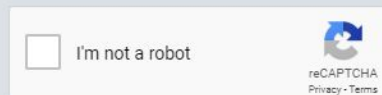
Name of person who assisted in the completion of this application

### 13. Be a poll worker

(Optional) If you check either of these boxes, your county voter registration office will contact you.

### 14. Annual Ballot Request Transfer (optional)

By checking the box, you are requesting that you continue to maintain your annual ballot request status when updating your address.



Continue

Clear

Cancel

**Note:** If you do not have a Pennsylvania driver's license or PennDOT ID card, you may upload a signature. If you do not upload a signature, print, complete and mail the signature request form.

**Questions about registering to vote?** Call 1-877-868-3772 (1.877.VOTESPA)