

## Voter Registration Application



Use this form to register to vote, or to update your name, address, or party registration.

To vote in the District of Columbia, you must:

- •Be a United States citizen
- •Be a resident of the District of Columbia
- •Maintain residency in the District of Columbia for at least 30 days prior to the election in which you intend to vote
- •Not claim voting residence or the right to vote in another U.S. State, territory, or country
- •Be at least 17 years old\*
- •Not have been found by a court to be legally incompetent to vote

To **vote in a primary election**, you must also be registered in the party holding the primary at least 21 days prior to the election unless you are registering for the first time.

\*You may vote in a primary election if you are at least 17 years old and you will be at least 18 years old by the next general election. You may vote in a general or special election if you are at least 18 years old.

Please complete all items on this form. You are not officially registered to vote until the Board of Elections has approved this application. You should receive a voter registration card in the mail within three weeks of submitting this application. If you are registering to vote in the District of Columbia for the first time and submit this application by mail or electronically, you may be required to provide identification that shows your name and current address the first time you vote in an election in the District of Columbia. Your mailed or electronically submitted application must be received by the Board by the 21st day before the next election. After that date, you can register to vote in person at 1015 Half Street SE, Suite 750. You can also register on the same day that you vote with valid proof of residence, but registering before you arrive at the polls will save you time.

If you do not receive your voter registration card, or if you have any questions, call (202) 727-2525, (866) 328-6837, or 711 (TTY), or visit **www.dcboe.org** 

¿Necesita ayuda en su idioma? Llame al (202) 727-2525 በቋንቋዎት እርዳታ ማግኘት ይሻሉ? በስልክ ቁጥር (202) 727-2525 ይደውሉ። 需要以您的语言帮助?拨打Call (202) 727-2525 Avez-vous besoin d'aide dans votre langue ? Appelez le (202) 727-2525 모국어로 도움이 필요하세요? (202) 727-2525로 전화해주세요 Cần sự trợ giúp ngôn ngữ của bạn? Hãy gọi (202) 727-2525

## (Use a pen to complete this form)

VRF\_Eng\_01122024

1	Check one: Are you a U.S. Citizen? ☐ Yes ☐ No				Reason for completing this f				form Voter ID Number			
•	If you checked 'no', do not complete th		•	U	New Registration □ Party Ch							
4	Check one: Would you like information on Yes				Entagle Entante of			hange Reg. Date		Clerk		
1a	serving as an election worker for the next election?			□Citizenship Status Change			Change					
	Last Name			First Name						Suffix		
3										Jr., Sr., I, III, IV)		
	Address of Residence in DC	S	elect one:	□N	E □NW	□SE	□sw	Apartm	ent Numbe	r Zip Cod	lo.	
4		•	0.000 0.101	,				, ipariii		210 000	10	
	Mailing Address, if different from #4 (Include jail or BOP ID Numb				er, if incarcerated) Zip Code				E-mail address (Optional)			
	Mailing Address, if different from #4 (include jail of BOP ID Nul				icarcerated)	arcerated) Zip Code E-mail address (Optional						
5												
6		none Number			V-issued ID			not have	one, enter t	ne last 4 di	gits of	
U	y				our Social Security Number:							
	Party Registration – Check one box			8a	☐ I have not been issued a Driver's License Number or a							
	Democratic Party	To vote in a prin election in the D			Social Security Number.							
9	Republican Party	nust be		Read and Sign the <b>Voter Declaration</b> below.								
	□D.C. Statehood Green Party	he	13	I swear or affirm that I meet each of the following qualification								
	Democratic Reput			• I am a U.S. citizen					rict of Columbia is at the address (#4)			
	□**other party (write <u>name</u> below)	above					ict of Columbia is at the address (#4)					
	Party.				• I am at least 16 years old							
	Ontional, If you need halp with water	o timo of			not been	be legally i	e legally incompetent to					
10	Optional: If you need help with voting, please indicate the typ help:				vote • I do no	he right to v	ote in anot	her				
	What is your primary language if it is not English?					I do not claim voting residence or the right to vote in another U.S. state, territory, or country  WARNING: If you sign this statement even though you know it is untrue, you can						
11	what is your primary language if it is not English?				WARNING							
	Name and Address on Last Registration:				be convicte	be convicted and fined up to \$10,000 and/or jailed for up to five years.						
12	and a substitution of the											
14												
	(If outside D.C., include county and state)				Signatu	Signature Date						

**BOARD OF ELECTIONS 1015 HALF ST SE STE 750 WASHINGTON DC 20077-0833** հվրվովվույնովըվՍԿ||լլոնյ|Սլ|ի|ՍԱլն<u>|</u>|լլոնոՍՍբգ|բգնդ|

**DISTRICT OF COLUMBIA** 

POSTAGE WILL BE PAID BY ADDRESSEE

FIRST-CLASS MAIL PERMIT NO. 10976 WASHINGTON, DC

**BUSINESS REPLY MAIL** 

NO POSTAGE **NECESSARY** IF MAILED IN THE **UNITED STATES** 

Wait! Make sure that you have:

- Completed the entire application
- Provided your full name, address, and date of birth
- ▼ Provided your DMV-issued identification number or the last four digits of your
- Read each point in the voter declaration and signed and dated the application Social Security Number
- Registered with a political party if you plan to vote in primary elections

locator at www.dcboe.org to find out where you can register to vote on Election Day. may register in person at 1015 Half Street SE, Suite 750 or use our polling place The registration-by-mail deadline is 21 days before the next election. If you miss this deadline, you weeks of mailing this application, please call (202)727-2525, (866)328-6837 or 711 (TTY). Columbia, you will receive a voter registration card. If you do not receive confirmation within three If the information on your application is complete and you are qualified to vote in the District of

(ZOZ)727-2525, (866)328-6837 o 711 (TTY). Información en español: Si le interesa obtener este formulario en español, llame al Questions? Call (202)727-2525, (866)328-6837, 711 (TTY) or visit www.dcboe.org.

If you mail this form in an envelope, you must add postage and use Zip Code 20003-4733

