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

To register you must:

- be a US citizen;
- be 18 years old by the end of this year;
- not be in prison or on parole for a felony conviction;
- not claim the right to vote elsewhere.

Questions?

Call your County Board of Elections listed on the back of this form or 1-800-FOR-VOTE (TDD/TTY Dial 711)

Find answers or tools on our website www.elections.ny.gov

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 will fill in below.

If you do not have a DMV or Social Security number, you may use a valid photo ID, a current utility bill, bank statement, paycheck, government check or some other government document that shows your name and address. You may include a copy of one of those types of ID with this form—be sure to tape the sides of the form closed.

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

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Have you voted before? 

Yes [x]  No [ ]

Your name was

Your address was

Your previous state or New York State County was

Identification

You must make 1 selection

For questions, please refer to Verifying your identity above.

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.

I wish to enroll in a political party

- Democratic party
- Republican party
- Conservative party
- Green party
- Working Families party
- Independence party
- Women’s Equality party
- Reform party
- Other

I do not wish to enroll in a political party

- No party

Optional questions

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

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.

Sign

Date
Register to donate your organs and tissues

By signing below, you certify that you are:

• 18 years of age or older;
• consenting to donate all of your organs and tissue;
• authorizing the Board of Elections to provide your name and address to the NYS Department of Health; and
• authorizing DOH to allow access to this information.

Please fold and seal your completed card (below) before mailing.

Your County Board of Elections address (below)

Address and stamp this section

Return to:

www.nyhealth.gov

or provide your name and address below.

Don't send your signature or ID copy to this location.