



# New York State Voter Registration Form

## 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.

## Send or deliver this form

Fill out the form below and send it to your county's address on the back of this form, or take this form to the office of your County Board of Elections.

Mail or deliver this form at least 25 days before the election you want to vote in. Your county will notify you that you are registered to vote.

## 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](http://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 you'll 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.

Información en español: si le interesa obtener este formulario en español, llame al 1-800-367-8683

中文資料: 若您有興趣索取中文資料表格, 請電: 1-800-367-8683

한국어: 한국어 신청서를 원하시면 1-800-367-8683 으로 전화 하십시오.

খনি অর্পদ এই ফর্মটি বাংলাতে পূর্ত করুন তারপর 1-800-367-8683 দ্বারা ফোন করুন

It is a crime to procure a false registration or to furnish false information to the Board of Elections. Please print in blue or black ink.

## Qualifications

1 Are you a citizen of the U.S.?  Yes  No

If you answer No, you cannot register to vote.

2 Will you be 18 years of age or older on or before election day?  Yes  No

If you answer No, you cannot register to vote unless you will be 18 by the end of the year.

## Your name

3 Last name  Suffix   
First name  Middle Initial

## More information

Items 6 & 7 are optional

4 Birth date  5 Sex  M  F  
6 Phone  7 Email

## The address where you live

Address (not P.O. box)   
8 Apt. Number  Zip code   
City/Town/Village   
New York State County

## The address where you receive mail

Skip if same as above

Address or P.O. box   
9 P.O. Box  Zip code   
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

12 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.

13  New York State DMV number   
 Last four digits of your Social Security number  x x x - x x -  
 I do not have a New York State driver's license or a Social Security number.

## 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.

14 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

## 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

## Optional questions

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

# Address and stamp this section

Your address

Place  
First-Class  
Stamp  
Here



Your County Board of Elections address (select from below)

Before mailing,  
remove tape,  
fold and seal

**New York City**  
32 Broadway, 7th Fl.  
New York, NY 10006  
(212) 487-5300

**Albany**  
37 North Russell Road  
Albany, NY 12209  
(518) 487-5980

**Allegany**  
6 Schuyler St.  
Belmont, NY 14813  
(585) 288-8294

**Broome**  
Government Plaza  
60 Hawley St.  
PO Box 1760  
Binghamton, NY  
13902  
(607) 778-2172

**Cattaraugus**  
267 Rock City St.  
Suite 100  
Little Valley, NY 14755  
(716) 938-2400

**Cayuga**  
157 Genesee St.  
(Basement)  
Ipswich, NY 13021  
(315) 253-1265

**Chautauque**  
7 North Elm St.  
Mayville, NY 14757  
(716) 753-4560

**Chemung**  
378 South Main St.  
PO Box 568  
Elmira, NY 14802  
(607) 737-5475

**Chenango**  
5 Court St.  
Norwich, NY 13851  
(607) 337-1760

**Clinton**  
City Government Ctr.  
Ste. 103  
137 Margaret St.  
Plattsburgh, NY 12901  
(518) 565-4740

**Columbia**  
101 State St.  
Hudson, NY 12534  
(518) 828-3115

**Cortland**  
112 River St.  
Suite 1  
Cortland, NY 13845  
(607) 753-5032

**Delaware**  
3 Gallant Ave.  
Delco, NY 13753  
(607) 748-2315

**Dutchess**  
47 Cension St.  
Poughkeepsie, NY  
12601  
(845) 486-2473

**Eric**  
124 W. Eagle St.  
Suffalo, NY 14202  
(716) 858-8891

**Essex**  
7581 Court St.  
PO Box 217  
Elizabethtown, NY  
12932  
(518) 873-3474

**Franklin**  
385 West Main St.  
Ste. 167  
Malone, NY 12953  
(518) 481-1663

**Fulton**  
2755 St. Hwy. 29  
Ste. 1  
Johnstown, NY 12095  
(518) 736-5526

**Genesee**  
County Building #1  
18 Main St.  
PO Box 284  
Batavia, NY 14021  
(585) 344-2950

**Greene**  
411 Main St.  
Ste. 437  
Catskill, NY 12414  
(518) 719-3550

**Hamilton**  
Rte. 8  
PO Box 175  
Lake Placid, NY  
12946  
(518) 548-4664

**Herkimer**  
108 Mary St.  
Ste. 1306  
Herkimer, NY 13350  
(315) 867-1102

**Jefferson**  
175 Arsenal St.  
Watertown, NY 13601  
(315) 785-3027

**Lewis**  
7600 E. State St.  
Lawville, NY 13367  
(315) 376-5329

**Livingston**  
County Govt. Ctr.  
8 Court St.  
Room 104  
Genesee, NY 14454  
(585) 243-7080

**Madison**  
County Office Bldg.  
N. Court St.  
PO Box 666  
Wampsville, NY  
13163  
(315) 366-2231

**Monroe**  
39 Main St. W.  
Rochester, NY 14614  
(585) 753-1550

**Montgomery**  
Old Courthouse  
9 Park St.  
PO Box 1500  
Fargo, NY 12068  
(518) 853-8180

**Nassau**  
240 Old Country Rd.  
Ste. 11  
Mineola, NY 11501  
(516) 571-2411

**Niagara**  
11 Main St.  
Ste. 100  
Lockport, NY 14094  
(716) 438-4040

**Oneida**  
Chen Station  
321 Main St.  
3rd Fl.  
Utica, NY 13501  
(315) 788-5765

**Onondaga**  
1000 Erie Blvd West  
Syracuse, NY 13204  
(315) 435-3312

**Ontario**  
74 Ontario St.  
Canandaigua, NY  
14224  
(585) 396-4005

**Orange**  
26 Court Lane  
PO Box 36  
Goshen, NY 10926  
(845) 291-2444

**Orleans**  
74 Ontario St.  
Albion, NY 14613  
(585) 589-3274

**Oswego**  
185 E. Seneca St.  
Box 9  
Oswego, NY 13120  
(315) 349-8350

**Otsego**  
Ste. 2  
140 County Hwy. 33W  
Cooperstown, NY  
13326  
(607) 547-4247

**Putnam**  
25 Old Route 8  
Carmel, NY 10512  
(845) 808-1300

**Rensselaer**  
New Paltz  
Government Ctr.  
1800 Seventh Ave.  
Troy, NY 12180  
(518) 270-2890

**Rockland**  
11 New Hempstead Rd.  
New City, NY 10958  
(845) 638-5172

**St. Lawrence**  
48 Court St.  
Canton, NY 13617  
(315) 379-2202

**Saratoga**  
50 W. High St.  
Ballston Spa, NY  
12020  
(518) 885-2249

**Schenectady**  
288 Broadway, Ste. E  
Schenectady, NY  
12305  
(518) 377-2469

**Schoharie**  
County Office Bldg.  
284 Main St.  
PO Box 99  
Schenango, NY 12157  
(518) 295-8388

**Schuyler**  
County Office Bldg.  
105 9th St., Unit 13  
Watkins Glen, NY  
14891  
(607) 538-8195

**Seneca**  
One D. Prence Dr.  
Watfordia, NY 13185  
(315) 639-1760

**Steuben**  
3 E. Putney St.  
Both, NY 14810  
(607) 664-2280

**Suffolk**  
Yaphank Ave.  
PO Box 700  
Yaphank, NY 11980  
(631) 852-4500

**Wayne**  
7376 State Rte. 31  
PO Box 638  
Lyonis, NY 14489  
(315) 946-7400

**Westchester**  
25 Clarences St.  
White Plains, NY  
10603  
(914) 995-5700

**Wyoming**  
4 Perry Ave.  
Warrens, NY 14569  
(585) 786-8931

**Yates**  
Ste. 1124  
417 Liberty St.  
Parramatta, NY 14857  
(315) 626-6136

## (Optional) Register to donate your organs and tissues

If you would like to be an organ and tissue donor, you may enroll in the NYS Department of Health (DOH) *Donate Life*™ Registry online at [www.ny.health.gov](http://www.ny.health.gov) or provide your name and address below.

You will receive a confirmation letter from DOH, which will also provide you an opportunity to limit your donation.



Last name \_\_\_\_\_

First name \_\_\_\_\_

Middle Initial \_\_\_\_\_ Suffix \_\_\_\_\_

Address \_\_\_\_\_

Apt. Number \_\_\_\_\_ Zip code \_\_\_\_\_

City \_\_\_\_\_

Birth date \_\_\_\_\_ Sex  M  F

Eye color \_\_\_\_\_ Height \_\_\_\_\_ Ft. \_\_\_\_\_ In.

By signing below,  
you certify that you are:

- 18 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 DOH for enrollment in the Registry;
- and authorizing DOH to allow access to this information to federally regulated organ procurement organizations and NYS-licensed tissue and eye banks and hospitals upon your death.

Sign \_\_\_\_\_ Date \_\_\_\_\_