

Massachusetts Official Mail-In Voter Registration Form

How to use this form

1. Check all the boxes that apply to you.
2. Print your name; first name, middle name or initial.
3. Print your former name, if applicable.
4. Print the address where you live now; number and street name or rural route number and box number (do not provide a post office box number), apartment number, city or town and full zip code. Use the map at right if you cannot otherwise identify your address.
5. Print the address where you receive all your mail, if it is different from the address entered on #4.
6. Print your date of birth; month, day and year.
7. Federal law requires that you provide your driver's license number to register to vote. If you do not have a current and valid Massachusetts driver's license, you must provide the last four digits of your social security number. If you have neither, you must write "none" in the box.
8. It is optional to provide your telephone number. If you include your telephone number and do not check "unlisted" it will be a public record.
9. Check a party, "no party" or print a political designation (not a party).
10. Print the address where you were last registered to vote.
11. If a person is helping you because you are physically unable to sign this form, that assisting person must print his or her name and address and has the option to print his or her telephone number.
12. Read the oath.
13. Print today's date.
14. Sign your name.

This form may be mailed or hand delivered to your city or town hall. If mailed, fold the form, tape it closed, place a first class stamp on it, print your city or town name and zip code for that city or town hall and drop into any mailbox.

Print all information in black ink. Follow above instructions for proper delivery.

1 Check all that apply: Are you a Citizen of the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No		2 NOTE: If you checked "no" to either of these questions, do not complete this form.	
3 Full name: <i>last name</i>		4 Former name (if applicable): <i>last name</i>	5 Address where you live now (street number, street name, rural route number and box number): <i>street number / street name / rural route number and box number</i>
6 Date of birth: <i>month / day / year</i>		7 Identification #: <i>license # or last four digits of your Social Security #</i>	8 Telephone (optional): <input type="checkbox"/> Check if unlisted
9 Party enrollment or designation (check one): <input type="checkbox"/> Democratic <input type="checkbox"/> Republican <input type="checkbox"/> No Party (unenrolled) <input type="checkbox"/> Political Designation (not a political party):		10 Address at which you were last registered to vote: <i>street number / street name / rural route number and box number / post office box</i>	
11 If the applicant is unable to sign this form, give the name, address and telephone number (optional) of the person helping the applicant; <i>name</i>		12 I hereby swear (affirm) that I am the person named above, that the above information is true, that I AM A CITIZEN OF THE UNITED STATES, that I am not a person under a guardianship which prohibits my registering to vote, that I am not temporarily or permanently disqualifed by law from voting, because of corrupt practices in respect to elections, that I am not currently incarcerated for a felony conviction, and that I consider this residence to be my home. Signed under the penalty of perjury.	
13 Today's date: <i>month / day / year</i>		14 Signed: <i>Sign your name here</i>	



William Francis Galvin
Secretary of the Commonwealth