

Voter Registration Application

Before completing this form, review the General, Application, and State specific instructions.

Are you a citizen of the United States of America?		Yes	No	This space for office use only.	
Will you be 18 years old on or before election day?		Yes	No		
If you checked "No" in response to either of these questions, do not complete form. (Please see state-specific instructions for rules regarding eligibility to register prior to age 18.)					
1	Mr. Miss Mrs. Ms.	Last Name	First Name	Middle Name(s)	Jr II Sr III IV
2	Home Address		Apt. or Lot #	City/Town	State Zip Code
3	Address Where You Get Your Mail If Different From Above		City/Town	State	Zip Code
4	Date of Birth _____ Month Day Year	5	Telephone Number (optional)	6 ID Number - (See item 6 in the instructions for your state)	
7	Choice of Party (see item 7 in the instructions for your State)	8	Race or Ethnic Group (see item 8 in the instructions for your State)		
9	I have reviewed my state's instructions and I swear/affirm that: ■ I am a United States citizen ■ I meet the eligibility requirements of my state and subscribe to any oath required. ■ The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be fined, imprisoned, or (if not a U.S. citizen) deported from or refused entry to the United States.			<div style="border: 1px solid black; height: 40px; width: 100%;"></div> <p style="text-align: center;">Please sign full name (or put mark) ▲</p> <p>Date: <div style="display: inline-block; width: 150px; border-bottom: 1px solid black; position: relative;"><div style="position: absolute; left: 50%; top: -5px; transform: translateX(-50%);">/</div><div style="position: absolute; left: 65%; top: -5px; transform: translateX(-50%);">/</div></div><div style="display: flex; justify-content: space-around; width: 150px;">MonthDayYear</div></p>	

If you are registering to vote for the first time: please refer to the application instructions for information on submitting copies of valid identification documents with this form.

Please fill out the sections below if they apply to you.

If this application is for a **change of name**, what was your name before you changed it?

A	Mr. Miss Mrs. Ms.	Last Name	First Name	Middle Name(s)	Jr II Sr III IV
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If you were **registered before but this is the first time you are registering from the address in Box 2**, what was your address where you were registered before?

B	Street (or route and box number)	Apt. or Lot #	City/Town/County	State	Zip Code
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If you live in a rural area but do not have a street number, or if you have no address, please show on the map where you live.

C	■ Write in the names of the crossroads (or streets) nearest to where you live.		<div style="text-align: right;">NORTH ↑</div>
	■ Draw an X to show where you live.		
	■ Use a dot to show any schools, churches, stores, or other landmarks near where you live, and write the name of the landmark.		
	<div style="border: 1px solid black; padding: 5px;">Example</div>	Route #2	
		● Grocery Store	
		Woodchuck Road	
	Public School ●		X

If the applicant is unable to sign, who helped the applicant fill out this application? Give name, address and phone number (phone number optional).

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Mail this application to the address provided for your State.

Maine Voter Registration

MAILING ADDRESS
Elections Division
Bureau of Corporations,
Elections and Commissions
101 State House Station
Augusta, ME 04333-0101

INSTRUCTIONS

1. ADD YOUR ID CODE

Provide your driver's license number, if you have no current and valid driver's license, the last four digits of your social security number or DOT-issued ID card number.

2. SIGN AND DATE THE FORM

You must sign the Voter Registration form prior to mailing it.

3. MAIL IT

Place a stamp on it and put your voter registration form in the mail.

4. VOTE

On Election Day, go to the polls and vote.

REGISTRATION DEADLINE

Delivered 21 business days before the election (or a voter may register in-person up to and including election day).

ID NUMBER

You must list your valid Maine driver's license number. If you don't have a valid Maine driver's license, then you must provide the last four digits of your Social Security Number. Voters who don't have either of these forms of ID must write "NONE" in this space.

RACE OR ETHNIC GROUP

Leave blank.

CHOICE OF PARTY

You must register with a party if you want to take part in that party's primary election, caucus, or convention (unless otherwise permitted by a political party).

SIGNATURE

To register in Maine you must:

- be a citizen of the United States
- be a resident of Maine and the municipality in which you want to vote
- be at least 17 years old (you must be 18 years old to vote)

FIRST TIME VOTERS WHO REGISTER BY MAIL

If you are registering to vote for the first time in your jurisdiction and are mailing this registration application, Federal law requires you to show proof of identification the first time you vote. Proof of identification includes: A current and valid photo identification or a current utility bill, bank statement, government check, paycheck, or government document that shows your name and address.

Voters may be exempt from this requirement if they submit a COPY of this identification with their mail in voter registration form.

If you wish to submit a COPY, please keep the following in mind: Your state may have additional identification requirements which may mandate you show identification at the polling place even if you meet the Federal proof of identification.

Do not submit original documents with this application, only COPIES.

MORE INFORMATION

For complete general and state-specific instructions for your voter registration application, visit the U.S. Election Assistance Commission.