








# Mail-In Application For Voter Registration

**You can use this form to:**

-  register to vote in Tennessee, or to
-  let us know that your name or address has changed.

**To register to vote:**

-  you must be a U.S. citizen, AND
  -  you must be a resident of Tennessee, AND
  -  you must be at least 18 years old on/or before the next election, AND
  -  you must not have been convicted of a felony, or if you have, your full rights of citizenship must have been restored (or you must have received a pardon).
-  **Anyone who registers by mail, must vote in person the first time he or she votes after registering.**

<p>Are you interested in working on Election Day?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
--

**MAIL OR HAND DELIVER THIS FORM TO YOUR COUNTY ELECTION COMMISSION.**

Click on  [http://tnsos.org/elections/election\\_commissions.php](http://tnsos.org/elections/election_commissions.php) to find your County Election Commission address.

**Instructions / checklist:**

- Please PRINT with a blue or black **INK** pen (not felt tip).
- Provide the information in items 1-8 below, read the VOTER DECLARATION, and sign by the "X".
- An application for voter registration must be postmarked or hand delivered to the proper county election commission office at least 30 days before an election.
- Voter registration records are public records, open to inspection by any citizen of Tennessee.

YOU ARE NOT REGISTERED TO VOTE UNTIL YOU RECEIVE A VOTER REGISTRATION CARD.

Names of persons selected for jury service in state court are not chosen from permanent voter registration records.

*If you are qualified and the information on your form is complete, we will add your name to the county's voter rolls. We will then mail you a voter card. This card will tell you where to vote.*

**For more information, call your county election commission.**

Fold Here

Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No Will you be 18 years of age on or before election day? <input type="checkbox"/> Yes <input type="checkbox"/> No If you checked "No" in response to either of the above, do not complete this form.	<b>FOR COUNTY ELECTION COMMISSION USE ONLY</b> Mail _____ Reg # _____ Approved _____ Eff. Date _____ P/A _____ District _____ Precinct _____ Ward _____										
<b>1</b> CHECK ONE: <input type="checkbox"/> NEW REGISTRATION <input type="checkbox"/> ADDRESS CHANGE <input type="checkbox"/> NAME CHANGE											
<b>2</b> LAST NAME _____ FIRST NAME _____ MIDDLE INITIAL _____	SEX <input type="checkbox"/> M <input type="checkbox"/> F RACE (OPTIONAL) _____										
<b>3</b> ADDRESS WHERE YOU LIVE (DO NOT GIVE A P.O. BOX) _____ APT. # _____ CITY _____ COUNTY _____ ZIP _____											
<b>4</b> ADDRESS WHERE YOU GET YOUR MAIL (IF DIFFERENT FROM #3) _____											
<b>5</b> DATE OF BIRTH _____ PLACE OF BIRTH _____	<b>6</b> SOCIAL SECURITY NUMBER, if any _____ (required under TCA §2-2-116 for purposes of identification and to avoid duplicate registration)										
<b>7</b> DAYTIME PHONE NUMBER _____											
<b>8</b> NAME AND ADDRESS ON LAST VOTER REGISTRATION NAME _____ ADDRESS _____ CITY _____ COUNTY _____ STATE _____ ZIP _____											
<b>VOTER DECLARATION</b> By completing the questions on this application and signing my name, I am swearing (or affirming) that the information I have provided is true, subject to the WARNING as stated.											
1. I am a resident of the State of Tennessee.	Yes _____ No _____										
2. I have been convicted of a felony.	Yes _____ No _____										
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><b>X</b> _____</td> <td style="width: 50%; border: none;">_____</td> </tr> <tr> <td style="border: none;">Signature (or mark) of Applicant</td> <td style="border: none;">Date</td> </tr> <tr> <td colspan="2" style="border: none; text-align: center;">                     If applicant is unable to sign, provide signature of person who signed for applicant.                 </td> </tr> <tr> <td colspan="2" style="border: none;">                     Signature of Person Assisting _____                 </td> </tr> <tr> <td colspan="2" style="border: none;">                     Address _____                 </td> </tr> </table>		<b>X</b> _____	_____	Signature (or mark) of Applicant	Date	If applicant is unable to sign, provide signature of person who signed for applicant.		Signature of Person Assisting _____		Address _____	
<b>X</b> _____	_____										
Signature (or mark) of Applicant	Date										
If applicant is unable to sign, provide signature of person who signed for applicant.											
Signature of Person Assisting _____											
Address _____											

