



DIVISION OF ELECTIONS

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How and Where to Register

How to Register:

Mail or deliver the [Voter Registration Application](#) and/or Party Affiliation Form to the County Commissioner of Registration or Superintendent of Elections ([see list](#)). The [Vote By Mail Ballot Application](#) needs to be mailed or delivered to the County Clerks Office in the county where you reside ([see list](#)).

Where to Register:

Applications for registration can be obtained from the Division of Elections, the [Commissioners of Registration](#) office in the County where you live or from your Municipal Clerk. Registration forms are also available at Division of Motor Vehicle offices. You can also register to vote at the same time you are applying for assistance or service at the following agencies:

- ▶ New Jersey Medical Assistance and Health Services Program
- ▶ WIC (Supplemental Food Program for Women, Infant & Children)
- ▶ Work First New Jersey Programs
- ▶ Division of Developmental Disabilities
- ▶ Office of Disability Services - Department of Human Services - Public Offices
- ▶ Armed Forces of the United States Recruitment Offices
- ▶ Division of Vocational Rehabilitation Services - Department of Labor
- ▶ Commission of the Blind & Visually Impaired
- ▶ County Welfare Agency or County Board of Social Services

You can also print a [registration application](#) and after entering required data, **mail** it to the Commissioners of Registration office in the county where you reside. In addition, this form can be used for name and address changes.

The Commissioners of Registration cannot accept faxed copies or an electronic transmission of a voter registration form since an original signature is required.

The registrant must down load the form and send the hard copy to the Commissioner of Registration. The registration deadline to vote at the next election is 21 days prior to election day.

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Department of State, Division of Elections, P.O. BOX 304, Trenton, NJ 08625



Please fill out and print the completed form. YOU MUST SIGN YOUR NAME and then mail to the appropriate county in order to be registered.



New Jersey Voter Registration Application

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Please print clearly in ink. All information is required unless marked optional.

1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input type="checkbox"/> Address Change <input type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change						FOR OFFICIAL USE ONLY Clerk _____ Registration # _____ Office Time Stamp _____ <input type="checkbox"/> by mail <input type="checkbox"/> in person
2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form)		Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form)				
3 Last Name _____		First Name _____		Middle Name or Initial _____		
4 Date of Birth (MM/DD/YY) _____		Suffix (ex. Jr., Sr., III) _____				
5 NJ Driver's License Number or MVC Non-driver ID Number _____ If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number."						
6 Home Address (DO NOT use PO Box) _____		Apt. _____		Municipality _____		
County _____		State _____		Zip Code _____		
7 Mailing Address if different from above _____		Apt. _____		Municipality _____		
County _____		State _____		Zip Code _____		
8 Last Address Registered to Vote (DO NOT use PO Box) _____		Apt. _____		Municipality _____		
County _____		State _____		Zip Code _____		
9 Former Name if Making Name Change _____				Day Phone Number (Optional) _____		
10 Do you wish to declare a political party affiliation? (Optional) <input type="checkbox"/> Yes, the party name is _____ <input type="checkbox"/> No, I do not wish to be affiliated with any political party.						
11 Gender <input type="checkbox"/> Female <input type="checkbox"/> Male		Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election		<input checked="" type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input checked="" type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws		
<input checked="" type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1						
Signature: Sign or mark and date on line below X _____ Date _____				If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____		

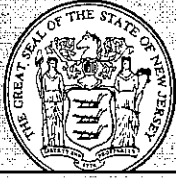
Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information required by section 5, or the information you provide cannot be verified, you will be asked to provide a COPY of a current and valid photo id, or a document with your name and current address on it to avoid having to provide identification at the polling place.
 Note: ID Numbers are Confidential and will not be released by any governmental agency. Any person who uses such numbers illegally shall be subject to criminal penalties.
- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.
- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is Optional and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- voting by mail
- polling place accessibility
- available election materials in this alternative language:
- becoming a poll worker
- voting if you have a disability, including visual impairment

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)



New Jersey Voter Registration Information

You can register to vote if:

- You are a United States citizen
- You will be 18 years of age by the next election
- You will be a resident of the State and county 30 days before the election
- You are NOT currently serving a sentence, probation or parole because of a felony conviction

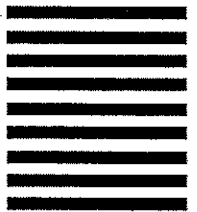
Registration Deadline: 21 days before an election

Your County Commissioner of Registration will notify you if your application is accepted.
If it is not accepted, you will be notified on how to complete and/or correct the application.

Questions? visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO 206 TRENTON NJ
POSTAGE WILL BE PAID BY ADDRESSEE

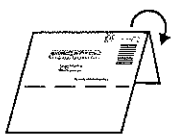
BURLINGTON COUNTY COMMISSIONER OF REGISTRATION
755 EAYRESTOWN RD
PO BOX 5000
MOUNT HOLLY NJ 08060-9972



Important: Print out at 100% - DO NOT REDUCE. Fold as illustrated to ensure proper mailing.



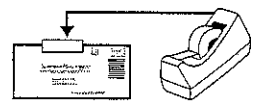
Put both pages together as shown



fold top down



fold bottom up



Tape top shut

TAPS HERE