

Voter Registration Form

First Name: _____

Last Name: _____

Address

(Number and Street:) _____

City: _____ Country: _____

State: _____

Date of Birth: _____

Place of Birth: _____

Signature: _____

Date: _____

Witness: _____

Date: _____

City or town where registration was held

Warning! If you sign this card and know it to be false, you can be convicted of a crime and jailed for up to five years, or fined, or both.



SCHOLASTIC

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