

Mail-In Voter Registration Application

West Virginia

You Can Use This Form To:

- ◆ apply to register to vote in West Virginia
- ◆ change your address or name
- ◆ change your political party

Follow These Steps To Complete This Form:

Box 1. Give your full name--(last name, first name, middle or maiden name--no nicknames).
(required)

Box 2. Give your birth date--(month/day/year).
(required)

Box 3. Enter the last four numbers of your social security number (not required).

Box 4. Enter the complete address where you live (your home address). **Do not list P.O. Box numbers here!** If your address does not include a street name & number, describe where you live by road number, intersection, or landmark to help identify your precinct:

Check here if you live within city limits.

Box 5. If available, give the telephone number where you can be reached during the day.

Box 6. Give your mailing address if it is different from your home address in Box 4. Be sure to give a post office box number if you use one.

Box 7. Please circle M for male, F for female.

Box 8. Mark the party of your choice, list another party on the line provided or mark the No Party Choice box.

Box 9. Please check if this is a new registration, a name change, a party change or an address change.

Box 10. To register to vote in West Virginia, you must meet the requirements in this box. You must also give your signature or mark. **Please note:** It is a felony to sign this form if you know you do not meet the requirements.
(required)

Box 11. If you were registered before, please enter your full name and complete address as it was on your last registration.

QUESTIONS?

CALL (304) 558-6000

Registration Deadline:

You may register at any time; however, in order to vote in an election, you must be registered thirty (30) days before that election.

Mailing Directions:

Be sure to provide all required information. Mail this completed form to your county clerk.

Required Information:

Any application which does not provide the information in 1, 2, 4 and 10 will be considered incomplete. **Do not fill in shaded areas.**

Note:

If available, use black ink. Print clearly.

Fill out this box only if your address does not include a street name & number. Otherwise put your address on page 2.

ATTENTION APPLICANT FOR REGISTRATION!

- * FOLLOW THE INSTRUCTIONS CAREFULLY AND COMPLETE THE ENTIRE FORM IN INK.
- * BE SURE TO SIGN YOUR LEGAL NAME IN THE SIGNATURE BOX.
- * MAIL YOUR APPLICATION TO THE COUNTY CLERK OF YOUR HOME COUNTY.
- * REMEMBER, THIS IS AN APPLICATION FOR REGISTRATION. If the confirmation card mailed to your home address is returned undeliverable or you are not eligible, you will not be registered.
- * ON ACCEPTANCE, A VOTER REGISTRATION CARD WITH YOUR PRECINCT NUMBER WILL BE MAILED TO YOU.

On-line Entry
Now Available!

1.	LAST NAME: _____ FIRST NAME: _____ MIDDLE OR MAIDEN NAME: _____	2.	BIRTH DATE: / /	3.	SOC. SEC. LAST 4 #S XXX-XX-____	PRECINCT:
4.	ADDRESS WHERE YOU LIVE (NO. & ST. OR RFD, CITY, STATE, ZIP): Do <u>NOT</u> Use P.O. Box	COUNTY:	5.	DAYTIME PHONE:	REGISTRATION NO:	
6.	ADDRESS WHERE YOU GET YOUR MAIL (IF DIFFERENT from address above). INCLUDE P.O. BOX, if any	7.	GENDER: Circle One M F	ID/CONFIRMATION:		
8.	PARTY CHOICE -- CHECK ONE BOX <input type="checkbox"/> DEMOCRAT <input type="checkbox"/> OTHER PARTY _____ <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> NO PARTY CHOICE <input type="checkbox"/> LIBERTARIAN <i>If a party choice in NOT marked, you will be listed as having No Party Choice</i>	Please Note You may vote a party primary ballot only if you are registered with that party. However, parties are permitted through official action to allow voters not affiliated with their party to vote their ballot upon request.	9.	THIS IS A: <input type="checkbox"/> NEW REGISTRATION <input type="checkbox"/> NAME CHANGE <input type="checkbox"/> PARTY CHANGE <input type="checkbox"/> ADDRESS CHANGE	DATE RECEIVED:	
10.	VOTER DECLARATION -- READ AND SIGN I SWEAR OR AFFIRM THAT: * I am a United States citizen; * I live in West Virginia at the above address (Box #4); * I am at least 18 years old or am 17 years old and will be 18 years old before the next general election; * I am not currently under conviction, probation or parole for a felony, treason or election bribery; and * I have not been judged mentally incompetent in a court of competent jurisdiction.	THIS IS MY SIGNATURE OR MARK IN THE SPACE BELOW: <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <div style="display: flex; justify-content: space-around; font-size: small;"> First Name Middle /Maiden Name Last Name </div> WARNING: If this statement is untrue and you sign it, you will be guilty of a felony and upon conviction can be fined up to \$5,000.00 and/or jailed up to three (3) years.				
11.	Name and Address of Last Voter Registration Name _____ Street _____ City _____ County _____ State _____	For an application to be complete, boxes 1, 2, 4 and 10 must be completed .				OFFICE INFO:
R-2 7-99	LAST NAME	FIRST NAME	M. INIT.	NO. & STREET	PRECINCT	

THIS IS AN OFFICIAL WEST VIRGINIA FORM FOR VOTER REGISTRATION BY MAIL, ISSUED BY THE SECRETARY OF STATE.

Instructions to County Clerks:

- * DO NOT REJECT THIS FORM SOLELY BECAUSE IT IS NOT ON STANDARD CARDSTOCK PAPER.
- * IF THE APPLICATION FOR REGISTRATION IS COMPLETE, BEARS AN ORIGINAL SIGNATURE, AND IS FROM A RESIDENT OF YOUR COUNTY WHO IS ELIGIBLE TO REGISTER, PROCESS THIS APPLICATION AS YOU WOULD ANY OTHER MAIL-IN REGISTRATION FORM.

Print This Form