Voter Preference Form

Name (Please Print: Last Name, First, M.I.):	
If you are not registered to vote whe here today?	re you currently reside, would you like to apply to register to vote
Yes	Individual is a Minor
OR	
□ No □	No, I am already registered to vote where I live.
If you do not check a box, you will b	e considered to have declined to register to vote at this time.
If you apply for voter registration, the be confidential.	e office at which you submit this registration application form will
No information relating to a declinat voter registration.	ion to register to vote will be used for any purpose other than for
	oter registration application form, we will help you. The decision ay fill out the application form in private.
election, you must have been a citize	vote, you must be at least 18 years of age on the day of the next n of the United States for at least one month prior to the next vania and the election district where you plan to vote for at least 30
your right to privacy in deciding whe choose your own political party or ot Secretary of the Commonwealth, Per	rfered with your right to register or to decline to register to vote, ther to register or in applying to register to vote, or your right to her political preference, you may file a complaint with the ansylvania Department of State, 302 North Office Building, artment of State, toll-free, at 1-877-VOTESPA (1-877-868-3772).
Signature	