

North Carolina Voter Registration Application/Update Form

Print Information and Sign Below

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I Attest, Under Penalty of Perjury, that: (Answer YES or NO to the following questions.)

- YES NO
- I am a United States citizen.
- I am 18 years old, or will be by general election day.
- I have been a resident at this address for 30 days or more. If less than 30 days, I moved here on _____(date).
- I will not vote in any other county or state after submission of this form. If I am registered elsewhere, I am canceling that registration at this time.
- If I have been convicted of a felony, my rights of citizenship have been restored.

STOP If you checked "NO" in response to any of these questions, **DO NOT COMPLETE THIS FORM**

Section 1 ▶ **Full legal name and birth date**

Last Name (Required) Jr. II IV
 Sr. III

First Name (Required) Middle Name (Required) Date of Birth - MM DD YYYY (Required)

Section 2 ▶ **Personal Identification Number (Required)**

Do you have a NC driver's license or NC identification card? Yes No
Or
 Do you have a U.S. issued Social Security Number? Yes No
 Have you been assigned a NC State Voter Number? Yes No

NC Driver License or Identification Number
 Social Security Number (Last Four Digits)
 NC State Voter Registration Number

Section 3 ▶ **Residence Address (Required)**

Street Address where you live - No P.O. Boxes or Rural Roads Apt/Unit
 City
 County State ZIP Code
 Have you lived here for 30 days or more? Yes
 If no, date moved _____ No
 Phone (Optional)

Map/Diagram
 If you do not have a street address, draw a map of where you reside. Please include roads and landmarks.

Section 4 ▶ **Mailing Address**

Address where you get your mail (if different from your residence address.) Apt/Unit
 City State ZIP Code

Section 5 ▶ **Gender**

Female
 Male

Section 6 ▶ **Race/Ethnicity**

American Indian/Alaska Native Asian Black/African American Other
 Hispanic/Latino White Two or More Races

Section 7 ▶ **Political Party Affiliation**

Democratic Republican Unaffiliated
 Other _____

Section 8 ▶ **Name and address used for your last voter registration if applicable**

Last Name used in Previous Registration First Name
 Previous Address State ZIP Code
 Previous City Previous County

Signature _____ Date _____

I HAVE READ AND UNDERSTAND THE CONTENTS OF THIS FORM

WARNING: If you sign this card and know it to be false, you can be convicted of a Class I felony

To Mail - Moisten, fold and seal.

