Register to vote

With this form, you register to vote in elections in New York State. You can also use this form to:
• change the name or address on your voter registration
• become a member of a political party
• change your party membership

To register you must:
• be a US citizen;
• be 18 years old by the end of this year;
• not be in prison or on parole for a felony conviction;
• not claim the right to vote elsewhere.

Questions?
Call your County Board of Elections listed on the back of this form or 1-800-FOR-VOTE (TDD/TTY Dial 711)
Find answers or tools on our website www.elections.ny.gov

Verifying your identity
We’ll try to check your identity before Election Day, through the DMV number (driver’s license number or non-driver ID number), or the last four digits of your Social Security number, which you’ll fill in below.
If you do not have a DMV or Social Security number, you may use a valid photo ID, a current utility bill, bank statement, paycheck, government check or some other government document that shows your name and address. You may include a copy of one of those types of ID with this form—be sure to tape the sides of the form closed.
If we are unable to verify your identity before Election Day, you will be asked for ID when you vote for the first time.

Send or deliver this form
Fill out the form below and send it to your county’s address on the back of this form, or take this form to the office of your County Board of Elections.
Mail or deliver this form at least 25 days before the election you want to vote in. Your county will notify you that you are registered to vote.

Affidavit: I swear or affirm that
• I am a citizen of the United States.
• I will have lived in the county, city or village for at least 30 days before the election.
• I meet all requirements to register to vote in New York State.
• This is my signature or mark in the box below.
• The above information is true, I understand that if it is not true, I can be convicted and fined up to $5,000 and/or jailed for up to four years.

Please print in blue or black ink.
For more information, please call: (585) 786-8931

Your County Board of Elections address (select from below):

- **New York City**
  - 32 Broadway, 7th Fl.
  - New York, NY 10004
  - (212) 497-5300
- **Albany**
  - 39 N. Pearl Street
  - Albany, NY 12207
  - (518) 474-5060
- **Buffalo**
  - 65 Galleria Blvd.
  - Buffalo, NY 14218
  - (716) 858-8891
- **White Plains**
  - 400 Main St.
  - White Plains, NY 10601
  - (914) 478-5900
- **Ulster**
  - 25 Old Route 6
  - Canadensis, NY 12414
  - (845) 533-9210

You can also visit www.nyhealth.gov and use the Donate Life™ Registry online to register your organ and tissue donation preferences.

If you would like to be an organ and tissue donor, you may enroll in the NYS Department of Health’s (DOH) Donate Life™ Registry online at www.nyhealth.gov or provide your name and address below.

By signing below, you certify that you are:

- 18 years of age or older;
- consenting to donate all of your organs and tissues for transplantation, research, or both;
- authorizing the Board of Elections to provide your name and identifying information to DOH for enrollment in the Registry;
- and authorizing DOH to allow access to this information to federally regulated organ procurement organizations and NYS-licensed tissue and eye banks and hospitals upon your death.

If you would like to be an organ and tissue donor, you may enroll in the NYS Department of Health’s (DOH) Donate Life™ Registry online at www.nyhealth.gov or provide your name and address below.

### Address and stamp this section

**Your address**

**Before mailing, remove tape, fold and seal**

### Register to donate your organs and tissues

If you would like to be an organ and tissue donor, you may enroll in the NYS Department of Health’s (DOH) Donate Life™ Registry online at www.nyhealth.gov.

You will receive a confirmation letter from DOH, which will also provide you an opportunity to limit your donation.

### Donate Life™

(Required)  
New York City: 32 Broadway, 7th Fl., New York, NY 10004 (212) 497-5300

Albany: 39 N. Pearl Street, Albany, NY 12207 (518) 474-5060

Buffalo: 65 Galleria Blvd., Buffalo, NY 14218 (716) 858-8891

White Plains: 400 Main St., White Plains, NY 10601 (914) 478-5900

Ulster: 25 Old Route 6, Canadensis, NY 12414 (845) 533-9210

Whether you choose to enroll online or through the mail, you can also enroll in the NYS Department of Health’s (DOH) Donate Life™ Registry online at www.nyhealth.gov.