

HOW TO FILL OUT A VOTER REGISTRATION FORM

Voters who have a Georgia driver's license can register [online](#) instead

<p>REQUIREMENT: If you are submitting this form by mail and you are registering for the first time in Georgia, you are required to submit proof of residence either with this form OR when you vote for the first time. Proof of residence includes one of the following: a COPY of a current and valid photo ID; or a COPY of a current utility bill, bank statement, government check, paycheck, or other government document that shows your name and address. You are exempt from this requirement if you are entitled to vote by absentee ballot under the Uniform and Overseas Citizens Absentee Voting Act, or if you provide your Georgia driver's license/ID number (or the last four digits of your social security number if you do not have a driver's license/ID) on this form and your identifying information is verified with a state database.</p>																			
Place copy of ID in pocket				Trim copy of ID to size															
COUNTY PRECINCT		MUNICIPAL PRECINCT		DISTRICT COMBO		DDS APPLICATION NO.		REGISTRATION NO.		CHANGE OF ADDRESS <input type="checkbox"/>		CHANGE OF NAME <input type="checkbox"/>		8a <input type="checkbox"/>		OTHER <input type="checkbox"/>			
1 LAST NAME		FIRST NAME		MIDDLE OR MAIDEN NAME		SUFFIX <input type="checkbox"/>		Jr. <input type="checkbox"/>		Sr. <input type="checkbox"/>		II <input type="checkbox"/>		III <input type="checkbox"/>		IV <input type="checkbox"/>		V <input type="checkbox"/>	
2 RESIDENCE ADDRESS: House No. and street name				APT. NO.		CITY		COUNTY		STATE GA.		ZIP CODE							
3 MAILING ADDRESS (if different from residence address): Post-office box or route								CITY		STATE		ZIP CODE							
4 TELEPHONE NUMBER		DATE OF BIRTH: MM/DD/YYYY		GENDER: Male <input type="checkbox"/> Female <input type="checkbox"/>		RACE/ETHNICITY: <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> American Indian <input type="checkbox"/> Other													
5a VALID GA. DRIVER'S LICENSE OR GA. I.D. NO.				If no GA Driver's License or GA. I.D. No., must provide last 4 digits of your Social Security Number				5b FULL SOCIAL SECURITY NUMBER (OPTIONAL) Last 4 Digits (Required)				<input type="checkbox"/> Check if you do not have a GA Driver's License, GA I.D. No. or Social Security No. 5c							
6 I SWEAR OR AFFIRM: (Your answer is required under federal law)												<p>WARNING: Any person who registers to vote knowing that such person does not possess the qualifications required by law, who registers under any name other than such person's own name, or who knowingly gives false information in registering shall be guilty of a felony. O.C.G.A. § 21-2-561</p>							
<p>Are you a citizen of the United States of America? Check One: Yes <input type="checkbox"/> No <input type="checkbox"/> 6a</p> <p>Will you be 18 years of age on or before election day? Check One: Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If you checked "No" in response to either of these questions, do not complete this form.</p> <p>I SWEAR OR AFFIRM THAT:</p> <p>I reside at the address listed above.</p> <p>I am eligible to vote in Georgia.</p> <p>I am not serving a sentence for having been convicted of a felony involving moral turpitude.</p> <p>I have not been judicially declared to be mentally incompetent.</p>																			
6b Date				X Signature				6c Signature of person helping illiterate or disabled voter				6d							
7 May we contact you about working as an election Day poll officer? Yes <input type="checkbox"/> No <input type="checkbox"/>				If you would like to receive additional information by email, please provide your e-mail address:				8 CHANGE OF NAME: If you are changing your name, list the name under which you were previously registered: Last Name Suffix First Middle or Maiden Name				Military Active Duty? Yes <input type="checkbox"/> No <input type="checkbox"/>							
CHANGE OF ADDRESS: If you are changing your address or if you were previously registered to vote, list your previous address:				CITY				COUNTY		STATE									

Color guide: Sections outlined in green are required, and sections in yellow are optional or required in select circumstances. Leave red sections blank.

Form Instructions: [Download the form](#) or request a form from the hotline (888-730-5816). Use blue or black ink and write clearly.

Section 1: Write in your legal name.

Section 2: Provide the address where you reside. This is "where you lay your head at night." This is the county where you are registering to vote.

Section 3: Leave blank UNLESS you have your mail delivered to an address other than the address you listed in Section 2. This may be a PO Box, for example.

Section 4: Add telephone number and DOB. If the county has to contact you, they will use the number you provide here, so ensure it is a good one. Gender and Race/Ethnicity are optional.

Section 5: If you have a GA Driver's License, add your number at 5a and leave the rest of Section 5 blank. If you do not have a GA Driver's License, add the last four digits of your social security number at 5b. If you don't have a GA Driver's License or a Social Security Number, check the box at 5c.

Section 6: Check the boxes that correspond with correct answers to the questions at 6a. Date the application at 6b. Sign the application at 6c using your typical, standard signature. If you are unable to sign, make your mark at 6c.

If you received assistance completing this application due to language, illiteracy, or physical disability, the person assisting you must sign, too, at 6d.

Section 7: Optional. If you want to be a poll worker, complete this section.

Section 8: If you were previously registered to vote under a different name or address, complete this section. If you complete this section, use the check boxes in 8a (above the “Suffix” field in Section 1).

Do I have to include Proof of Residence with my Registration Form? If you selected 5c because you do not have a valid GA Driver’s License (5a) or SSN (5b) AND you are registering for the first time in Georgia, then YES, you do need to provide proof of residence. Send a copy or show one of the following to your county registrar:

- Georgia Driver’s license
- Valid ID card issued by any state, or the United States authorized to issue ID with photo
- Valid U.S. Passport
- Valid Government employee ID card with photo
- Valid United States military ID card with photo
- Valid tribal ID card with photo
- Current utility bill with elector’s name and address
- Current bank statement with elector’s name and address
- Current paycheck or Government check with elector’s name and address
- Valid Government document with elector’s name and address

Delivery and Mailing:

- You may mail your application (and proof of residence, if applicable) or deliver it in person to your [county registration office](#).
- Contact your county voter registration office or call the hotline if you do not receive a voter precinct card by mail in two to four weeks. You can also check your registration status on [MVP](#).

The voter registration deadline is December 7, 2020!