

Voter registration

Representation of People Act 1983



Electoral Services helpline: public **020 8753 4466** 8am-8pm Monday to Friday 8am-1pm Saturday
Duty officer (out of hours): **020 8748 8588**, office **020 8753 2177**

Address

AREA: _____ FORM A NO: _____

Record of visits

No.	Date	Time	Call card
1			
2			
3			
4			
5			

If new residents moved in **AFTER 10 October**

Names on current voters list

(British, Commonwealth, Irish and European Union ONLY)

Surname	First name and initial	Nationality (circle if still resident)	<input checked="" type="checkbox"/> If aged over 70

European Union = Austria, Belgium, Bulgaria, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Italy, Latvia, Lithuania, Luxembourg, The Netherlands (Holland), Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden

16 & 17 year olds

Remember: write 'NONE', if appropriate

Surname	First name and initial	Nationality	Date of birth

No one eligible to vote

Property empty (how do you know?)

Foreign national (write nationality)

Other (write why)

Signature

The information I have given on this form is true

Signed

Date