APPLICATION FOR ENTRY OF NAMES IN THE REGISTER OF ELECTORS (PLEASE USE BLOCK CAPITAL LETTERS AND BALLPOINT PEN)

1.	Full Postal Address of residence:							
2.	Are there any other households/apartments covered at 1. above?							
	Yes							
	No							
3.	List below every person aged 18 years or over, or those who will reach 18 years							
	by 15 February next, and who are ordinarily resident at the above address. Give							
	each person's date of birth and tick the appropriate column(s) to indicate							
	citizenship.							

(v) Edited Register Opt Out (see Note	Opt Out Box			
	Non EU			
enship	Other - EU			
(iv) Citizenship Please $$	British			
	Irish			
(iii) Date of Birth (DD MM YY eg. 02 06 52)				
(ii) First Names				
(i) Surname				

4.	If any person has taken up residence at the above address during the past year,							
	please state the person's name and former address:							
5.	Declaration: I believe the information given above is correct.							
	It is an offence to give the registration authority any information required for the							
	purpose of its duties or to give false information.							
Sig	gnature ;							
Da	nytime Telephone number (in case of query):							
Da	ite:							
W.	hen this form is completed, return or post it to your local registration authority.							