

Electoral registration form for a member of the Armed Forces, or their husband, wife or civil partner

Only one person for each form. Please read the notes carefully before filling in this form and complete in **BLACK INK** and **BLOCK CAPITALS**.

1 About you

First name(s) (in full)

Surname

Service Address (for correspondence)

*Daytime telephone:

*E-mail address:

*You do not have to give either but it may help to contact you if there are any questions. Reminders to renew your registration may be e-mailed to ensure receipt.

2 UK registration address

The UK address you wish to register at:

The above address is (tick one box):

- Where I am living now
- Where I would be living if I/my husband, wife or civil partner were not a member of the Armed Forces
- Where I have lived in the past

Edited Register

Tick this box if you do not want your name to be included on the Edited Register. This Register is available for general sale and can be used for any purpose. It can be bought by any person, company or organisation and used for commercial activities such as marketing.

For office use only:

3 Service details

Please give full service details of either yourself or your husband, wife or civil partner (as appropriate)

Rank or rating:

Service

British Army Royal Navy Royal Air Force

Service number:

Regiment or Corps (Army only):

Tick here if you are the husband, wife or civil partner of a service voter

4 Your declaration

As far as I know, the details on this form are true and accurate. You can be fined for making a false statement on this form

I am a British, Irish, Commonwealth or other European Union citizen (please state nationality if from another EU state).

I am living in the UK or would be if I or my husband, wife or civil partner were not serving in the Armed Forces.

I am aged 18 or over. If you are under 18, please give your date of birth:

Day

Month

Year

Signature - Please sign within the box below:

Date (of signing):

Absent vote application form for a member of the Armed Forces, or their husband, wife or civil partner

Please complete EITHER the section relating to voting by post OR those relating to voting by proxy in **BLACK INK and BLOCK CAPITALS** and return the whole application form.

UK registration address

First name(s)

Surname

Title (Mr, Mrs, Ms, Miss, Dr, Other)

Postal voting – address for ballot paper

Notes on completing this page

Insert your name and address if necessary, then give EITHER the address to which you require the ballot paper to be posted OR the details of the person you wish to vote on your behalf as proxy.

Give your date of birth and sign your declaration. Your proxy may also sign their declaration, but this is not a requirement if you have confirmed their willingness to act on your behalf.

For office use only
Polling District

Proxy voting – who will be voting on your behalf?

Name (in full)

Address

Relationship to you (if any)

Proxy's Declaration (if your proxy is signing)

I am capable and willing to be appointed to vote as the applicant's proxy.

Signature:

Date:

Tick this box if you would like to cast your proxy vote by post. We will send you an application form.

Your Date of Birth

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Day

Month

Year

Your Declaration

As far as I know, the details on this form are true and accurate. *I have asked the person named above who is willing and able to vote for me as my proxy*. (delete between *and* if voting by post)

Sign within the border using BLACK INK

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I cannot supply a signature because (medical reason)

Date:

If you asked someone to help you complete this form, please attach their name and address