REGISTER TO VOTE BY EMAIL, MAIL OR FAX



FILL OUT THIS FORM TO GET YOUR NAME ON ELECTION NUNAVUT'S VOTERS LIST AND BE ELIGIBLE TO VOTE.

YOU ARE ELIGIBLE TO VOTE IN AN ELECTION AND A PLEBISCITE IF:

- ✓ You are a Canadian Citizen;
- ✓ You will be 18 years or older on Election Day;
- ✓ You are a current resident of the community or constituency (*for MLA elections*);
- ✓ You are not disqualified from voting; and
- ✓ You have lived in Nunavut for at least one year on Election Day;
- ✓ (for by-elections): you have lived in the constituency since the day the writ is issued.

SCAN AND EMAIL, MAIL OR FAX THIS COMPLETED FORM TO ELECTIONS NUNAVUT WITH A COPY OF YOUR IDENTIFICATION:

- ✓ ONE PIECE OF ID THAT SHOWS YOUR NAME, ADDRESS AND SIGNATURE; OR
- ✓ TWO PIECES OF ID: ONE WITH YOUR NAME AND SIGNATURE + ONE WITH NAME AND ADDRESS.

PLEASE PRINT CLEARLY (Fields marked • are mandatory)	
C OMMUNITY•	CONSTITUENCY
LAST NAME+	FIRST AND MIDDLE NAME(S)+
DATE OF BIRTH• / / YYYY/ MM / DD	Gender
Home Address+	MAILING ADDRESS+
HOUSE/APT # STREET	PO Box Postal Code
PHONE NUMBER: ()	EMAIL ADDRESS:
I HAVE LIVED IN THIS COMMUNITY+	I HAVE LIVED IN NUNAVUT
ALL MY LIFE OR SINCE / /	ALL MY LIFE OR SINCE / /
I NEED A MOBILE POLL:	I AM A FRENCH LANGUAGE RIGHTS HOLDER:
FOR VOTER: I certify that the information	For ELECTION OFFICER: I believe the
above is correct.	information above is true.
x	X
Voter's Signature	Election Officer's Signature
Date	Name of Election Officer
Privacy Statement: The information in this form is colle	CFFICE USE ONLY Cted under the authority Voter ID #

Privacy Statement: The information in this form is collected under the authority of the Nunavut Elections Act. The information will only be used for elections, by-elections and plebiscites. Questions can be directed to: Chief Privacy Officer, Elections Nunavut: privacy@elections.nu.ca or call 800.267.4394.

ions, ficer,