

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 have lived in Nunavut for at least one year on Election Day;
- ✓ You are a current resident of the community or constituency (*for MLA elections*);
 - ✓ You are not disqualified from voting; and
 - ✓ (*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)

COMMUNITY♦		CONSTITUENCY	
LAST NAME♦		FIRST AND MIDDLE NAME(S)♦	
DATE OF BIRTH♦ <div style="text-align: center;">/ / YYYY / MM / DD</div>		GENDER♦	
HOME ADDRESS♦ <div style="display: flex; justify-content: space-between;">HOUSE/APT #STREET</div>		MAILING ADDRESS♦ <div style="display: flex; justify-content: space-between;">PO BOXPOSTAL CODE</div>	
PHONE NUMBER: ()		EMAIL ADDRESS:	
I HAVE LIVED IN THIS COMMUNITY♦ <input type="checkbox"/> ALL MY LIFE OR <input type="checkbox"/> SINCE / / <div style="text-align: center;">YYYY / MM / DD</div>		I HAVE LIVED IN NUNAVUT♦ <input type="checkbox"/> ALL MY LIFE OR <input type="checkbox"/> SINCE / / <div style="text-align: center;">YYYY / MM / DD</div>	
I NEED A MOBILE POLL: <input type="checkbox"/>		I AM A REGISTERED FRENCH LANGUAGE RIGHTS HOLDER: <input type="checkbox"/>	
<p>FOR VOTER: I certify that the information above is correct.</p> <p style="text-align: center;">X _____ Voter's Signature</p> <p style="text-align: center;">_____ Date</p>		<p>FOR ELECTION OFFICER: I believe the information above is true.</p> <p style="text-align: center;">X _____ Election Officer's Signature</p> <p style="text-align: center;">_____ Name of Election Officer</p>	

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.

OFFICE USE ONLY
Voter ID #