

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♦ / / <small>YYYY / MM / DD</small>		GENDER♦	
HOME ADDRESS♦ <small>HOUSE/APT # STREET</small>		MAILING ADDRESS♦ <small>PO Box POSTAL CODE</small>	
PHONE NUMBER: ()		EMAIL ADDRESS:	
I HAVE LIVED IN THIS COMMUNITY♦ <input type="checkbox"/> ALL MY LIFE OR <input type="checkbox"/> SINCE / / <small>YYYY / MM / DD</small>		I HAVE LIVED IN NUNAVUT♦ <input type="checkbox"/> ALL MY LIFE OR <input type="checkbox"/> SINCE / / <small>YYYY / MM / DD</small>	
I NEED A MOBILE POLL: <input type="checkbox"/>		I AM A FRENCH LANGUAGE RIGHTS HOLDER: <input type="checkbox"/>	
FOR VOTER: I certify that the information above is correct. X _____ Voter's Signature _____ Date		FOR ELECTION OFFICER: I believe the information above is true. X _____ Election Officer's Signature _____ Name of Election Officer	

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 #