



Caramel Apple Election Voter Registration Form™

Voter Information (please print or type)

Last Name	
First Name	
Street Address	
City	
State	
ZIP Code	
Telephone (home)	
Date of Birth	
Party Affiliation (optional)	

1. Have you ever pleaded guilty to or been found guilty of a felony ____ YES ____ NO; If YES, do not complete this form.
2. Do you claim the right to vote in another state or country ____ YES ____ NO; If YES, do not complete this form.

The information provided is true to the best of my knowledge. If I have provided false information, I may be subject to a fine of up to \$10,000 and or imprisonment for up to 10 years under state and federal laws.

Signature	
-----------	--