Sample:

KIDS VOTING USA
Southeast Pennsylvania

Voter Registration Form

1.
Last Name: First: M.I.:

2.
This is a New Registration ☐ Yes ☐ No

PARTY PREFERENCE (Optional):
☐ Democrat ☐ Libertarian Party
☐ Republican ☐ Green Party

Independent (no party membership)

Other: _____
Name of Party

3.
Address: City: State: Zip: Precinct #:

4.
Grade: School:

5.
Date of Birth:

6.
Teacher:

_____ Signature (not printed)

_____ Printed Name of Applicant

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