## OFFICE OF THE REGISTRAR GENERAL OF ELECTORS REGISTRATION FORM

Email: election	s@gov.gg		lelephone /1/000		
Current Address			vious Address if yo	=	
I hereby declare t					
<ol> <li>Am at least</li> </ol>	t 15 years of age				
2. Am ordina	arily resident in Guernse	y, and have been e	either		
a) f	or a period of at least tw	vo years immediate	ely preceding toda	y's date; or	
b) a	nt any time before this da	ate for a period of	at least five years i	n total.	
	dinarily resident in Guerr		•		
	, , , , , , , , , , , , , , , , , , , ,	,,			
Surname	First Names	Date of	Signature	Date	
		Birth*			
<b>*</b> 0					
*Compulsory for 15 y	rear olds, otherwise optional.				
Telephone Number	/ Email You do not have to g	ive these but it may he	lp us resolve any querie	s quickly .	

## Please return to:

Electoral Roll Office, Sir Charles Frossard House, La Charroterie, St Peter Port, GY1 1FH