

# Electoral registration form

Please return completed forms to: The Chief Executive, States of Alderney, FREEPOST GU224, Alderney GY1 5FS

## 1. About you

Surname	First names (in full)	Date of birth (optional)	Date of arrival in Alderney (optional)
(1)			
(2)			
(3)			
(4)			

#### **Address**

Note: Optional information will not be included on copies of the Electoral Roll made available for inspection, nor will it be disclosed to any other person.

### 2. Declaration

I hereby declare that:

- a. I have attained, or will attain by the 15th October in the year in which I apply for my name to be inscribed in the register of electors, the age of 16 years\*;
- b. I am not an alien;
- c. I am ordinarily resident in Alderney;
- d. I will have been ordinarily resident in Alderney throughout the 12 months preceding the 15<sup>th</sup> October of the year in which I apply for my name to be inscribed in the register of electors;
- e. I am not (age apart) subject to any legal disability; and
- f. I apply to have my name inscribed in the register of electors (\*The Government of Alderney (Amendment) Law, 2022.)

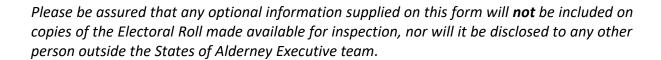
Signature of applicant (1)	Signature of applicant (2)	Signature of applicant (3)	Signature of applicant (4)
Date:	Date:	Date:	Date:

#### For office use only

Date received:

Date added to database:

## **ALDERNEY ELECTORAL ROLL**



PLEASE RETURN COMPLETED FORM BY 15<sup>th</sup> OCTOBER of the year of application to be included in the Electoral register
To: Chief Executive, States of Alderney, FREEPOST GU224, Alderney GY1 5FS

Extra forms are available from the States General Office if required.

**Data Processing Notice:** This information will be processed in line with the Data Protection (Bailiwick of Guernsey) Law, 2017. For full details of our Data Processing Notice and how we look after your data please visit: <a href="www.alderney.gov.gg/dp">www.alderney.gov.gg/dp</a>. If you don't have access to the internet please contact us and a paper copy will be provided.