

APPLICATION TO VOTE BY PROXY AT A PARTICULAR ELECTION

Each person applying for a proxy vote must complete a separate form. If more forms are needed, please photocopy this one or ask the Electoral Registration Officer for more.

About you (If your name has not been pre-printed, please insert your full name and the address where you are registered to vote)	Office use only																
Name:..... Address																	
I confirm that I have asked the person named below to act as my proxy, and he/she is willing to vote on my behalf (Please insert their details below)																	
Surname:																	
Other names:	Relationship to you (If applicable) :																
Full address: <ul style="list-style-type: none"> • Tick this box if you think your proxy would prefer to vote by post <input type="checkbox"/> 																	
I wish to vote by proxy at the forthcoming election to be held on (please insert date) <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">D</td> <td style="text-align: center;">D</td> <td style="text-align: center;">M</td> <td style="text-align: center;">M</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> </tr> </table>										D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y										
Please explain why you want a proxy vote and why you are not able to go to your polling station on Election Day:																	

Part 4: Please enter your Date of Birth

Please complete in **Black Ink**

Day Month Year

--	--	--	--	--	--	--	--

Part 5: Your signature

Please sign within this box using **Black Ink** taking care to sign within the box and not over the lines (This is extremely important because the form will be scanned into our computer system. The form will be returned to you if not signed in black ink)

The date you signed this form: / /