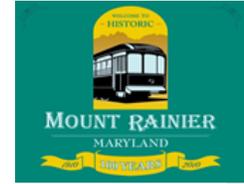


CITY OF MOUNT RAINIER

1 Municipal Place
Mount Rainier, MD 20712



VOTER REGISTRATION FORM FOR CITY ELECTIONS

YOU MAY USE THIS FORM TO:

Register to vote in Mount Rainier municipal elections or to file a change of name or address if you are already registered to vote with the City. This is NOT a voter registration application for voting in national (federal), state, county, or school board elections.

TO REGISTER USING THIS FORM, YOU MUST:

- Have had as your primary residence an address in Mount Rainier for at least 30 days before the next City election.
- Be at least 16 years of age by the time of the next election.
- Not claim the right to vote elsewhere in the U.S.
- Not have been convicted of buying or selling votes.
- Not be under guardianship for mental disability or, if you are, not have been found by a court to be unable to communicate a desire to vote.

INSTRUCTIONS:

Please see required identification and proof of residence on the back of this form. Complete items 1-7 and, if applicable, complete items 8-9. Applicants must sign and date item 10.

Check the line that applies:

____ New Mount Rainier voter registration
 ____ Name Change ____ Address Change

PLEASE PRINT INFORMATION

1	Are you registered to vote in the State of Maryland? ____ Yes ____ No If "yes," you do not have to register with the City of Mount Rainier. Do not use this form. Are you eligible to vote <u>and</u> desire to vote in state, county, and/or federal elections? ____ Yes ____ No If "yes," you should register with the Prince George's County Board of Elections. Do not use this form.			
2	Last Name:	First Name:	Middle Name:	Suffix
3	Date of Birth (mm/dd/yyyy):	Gender: ____ Female ____ Male ____ Prefer Not to Answer	Phone Number:	Email (optional):
4	Mount Rainier residence address: Number and Street:			Apt. #
5	City:		State:	Zip Code:
6	Mailing Address (if different from above): Street or P.O. Box			Apt. #
7	City:		State:	Zip Code:

PREVIOUS MOUNT RAINIER REGISTRATION INFORMATION (IF ANY)			
8	Name on Last Registration:	Last	First Middle Suffix
9	Address on Last Registration:	Street	City State Zip
Under penalty of perjury, I swear or affirm that (a) I am a resident of the City of Mount Rainier, Maryland; (b) I do not claim the right to vote elsewhere in the United States; (c) I will be 16 years old by the time of the next City election; (d) I have not been convicted of buying or selling votes; (e) if I have been convicted of a felony, I have completed serving any court-ordered sentence of imprisonment; and (f) all information on this application is true and correct.			
10	Applicant Signature:		Date:
Internal Use Only:		Received by:	Date Received:

City of Mount Rainier, Voter Registration Form for City Elections, page 2

Required Identification and Proof of Residence

Please provide:

(1) Photo identification or an identification card issued by a federal, state or local government entity of the United States of America or any foreign country, non-profit entity registered to conduct business in the State of Maryland, or school, that contains your name and a photograph or identifying information such as date of birth, height, weight, and eye color. Examples of acceptable documentation include a U.S. or foreign passport, visa, alien registration card, driver’s license, Motor Vehicle Administration (MVA) identification card, or military, employer, school, or non-profit-issued identification card;

IF YOUR IDENTIFICATION DOCUMENTATION DOES NOT INDICATE YOUR RESIDENTIAL ADDRESS IN THE CITY OF MOUNT RAINIER, YOU MUST ALSO SUBMIT:

(2) A document that establishes current residence in the City of Mount Rainier. Examples could include copy of a deed, house or apartment lease, utility bill, paycheck stub, bank statement, school record, or other business or government document that shows your name and current address in the City of Mount Rainier;

OR

If you cannot provide documentation of your residence in Mount Rainier, you must submit a Mount Rainier City Voter Registration Affidavit (“Affidavit”) attesting to your place of residence. The Affidavit must be executed by a person who (1) is a registered voter in the City of Mount Rainier; (2) is present with you to submit the Affidavit or signs the Affidavit before a notary public; and (3) has personal knowledge of your place of residence. Such Affidavit shall be executed under the penalties of perjury.

To register in person, bring your photo identification and other required documentation with you to the Municipal Building at 1 Municipal Place, Mount Rainier, MD, during the hours of 9 a.m. to 5 p.m., Monday through Friday. If you do not have documentation of your residence, you must either bring with you a qualified witness to sign an Affidavit or an original, notarized Affidavit. If you are unable to come to the Municipal Building during those hours, please call 301 985-6585 to arrange for another time.

To register by mail, mail this completed form with legible copies of your photo identification and other required documentation, and, if applicable, an original, notarized Affidavit, to the following address:

City of Mount Rainier Board of Elections
1 Municipal Place
Mount Rainier, MD 20712

Important Information for Non-United States Citizens:

If you apply for naturalization, you will be asked whether you have ever registered or voted in a federal, state or local election in the United States. The City can provide a letter explaining that non-U.S. citizens who are residents of Mount Rainier may register and vote in Mount Rainier municipal elections. Please be aware that registering to vote or voting in jurisdictions other than Mount Rainier may result in adverse immigration consequences for a non-U.S. citizen.

Registering to vote in Mount Rainier does not authorize you to vote in any other elections!

CONTACT US:

For additional information, call the City Clerk at 240-623-4648, or send email to elections@mountrainiermd.org.

Internal Use Only:

Application reviewed by (print): _____ Date Reviewed: _____

Applicant provided required photo ID: Yes No Applicant provided proof of residency: Yes No

Type of photo ID provided: _____ Government-issued ID Expiration Date: _____
 _____ Employee ID
 _____ School ID
 _____ None

Applicant provided affidavit of identifying witness: Yes No

CITY OF MOUNT RAINIER
1 Municipal Place
Mount Rainier, MD 20712



CITY VOTER REGISTRATION – AFFIDAVIT OF WITNESS

This form must accompany an application form to register to vote in the City of Mount Rainier elections if the applicant is not able to provide the required documentation of residence. This form is to be used only when the applicant is unable to provide documentation of his or her proof of residence. The affidavit shall be executed under the fullest penalties of perjury.

THE APPLICANT MUST STILL PRESENT SOME FORM OF IDENTIFICATION OF HIS OR HER OWN.

This affidavit must be executed by a person who:

- Is registered to vote in the City of Mount Rainier; and
- Has personal knowledge of the applicant’s identity and place of residence.

APPLICANT INFORMATION			
Last Name:	First Name:	Middle Name:	Suffix:
Mount Rainier Residence Address: Number and Street:			Apt. #
City:		State:	Zip Code:
Under penalty of perjury, I swear or affirm that (a) I am a resident of the City of Mount Rainier and (b) all information on this application form is true and correct.			
Applicant Signature:			Date:
WITNESS INFORMATION			
Last Name:	First Name:	Middle Name:	Suffix:
Date of Birth (mm/dd/yyyy):	Email:	Phone:	
Mount Rainier Residence Address: House Number/Street:			Apt. #
City:		State:	Zip Code:
<u>Note: Read the following oath but do not sign the affidavit until requested to do so by an authorized official at City Hall or, if this Affidavit will be submitted by mail, you must sign before a notary public.</u>			
Under penalty of perjury, I swear or affirm that (a) I know or have reason to believe the above-named person is a current resident of the City of Mount Rainier and will have lived in Mount Rainier for at least 30 days prior to the City’s next election day, which is May 5, 2025, and (b) the above statements are true to the best of my knowledge and belief.			
Witness Signature:			Date:

Internal Use Only:	
Application reviewed by (print): _____	Date reviewed: _____
Witness provided required photo ID: <input type="checkbox"/> Yes <input type="checkbox"/> No	Witness provided proof of residency: <input type="checkbox"/> Yes <input type="checkbox"/> No
Type of photo ID provided: <input type="checkbox"/> Government-issued ID <input type="checkbox"/> Employee ID <input type="checkbox"/> School ID	Expiration Date: _____
Identification provided by applicant: _____	

Mount Rainier Board of Elections