SAG HARBOR UNION FREE SCHOOL DISTRICT

200 Jermain Avenue, Sag Harbor, New York 11963

Military Voter Registration Application

BE ADVISED: This Application registers you as a Military Voter with the School District only. If you would like to receive a Military Ballot please fill out the separate Application for Military Ballot. If you wish to register as a Military Voter with your County or State Board of Elections please contact them directly.

This application must be received by the Office of the School District Clerk, not later than 5:00 PM the day before the school district's board of registration will meet to prepare the school district register, or on the twenty-sixth (26th) day before the election for all school districts and school district public libraries that provide for the registration of voters during certain specified hours of the school day pursuant to Education Law §2014(2) and (6), except city school districts with less than 125,000 inhabitants in which case the application must be received not later than 5:00 PM on the fifteenth (15th) day before the election.

Please print clearly and in black or blue ink.

I am (check one):			
\Box In military service* and by r	eason of such military service will be abs	sent on the day of regist	tration or
election.			
☐ In military service and will	be discharged from such military service	within 30 days of the e	lection.
□ (check one) The spouse	, parent, child, or dependent	of such qualified milita	ary voter
	n the qualified military voter and am also	o a qualified voter and r	resident of the
same school district.			
F			
Name:			
last name or surname	first name	middle initial	suffix
Residential Address in School	ol District:		
street address	city, town, village	state	zip code
Military Address:			
-			
street address	city	state	zip code
Street address	City	State	Zip code
Preference for Receiving Milita	ry Ballot Materials (check one and answ	vor).	
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a rax (provide rax manicer)			
Military Voter Affirmation			
	ng is a true statement to the best of my ki	nowledge and belief, an	nd I
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Cianalum a (Mai	<i>-</i>	-1-	
Signature of voter	D	ate	
	□ In military service* and by relection. □ In military service and will □ (check one) The spouse accompanying or being with same school district. Name: □ last name or surname Residential Address in School street address Military Address: □ street address Preference for Receiving Milita □ Mail (specify address: □ Res □ Email (provide email addres □ Fax (provide fax number) □ Military Voter Affirmation: I hereby declare that the foregoin understand that if I make any magnetic services and will address on the service and services and serv	□ In military service* and by reason of such military service will be abselection. □ In military service and will be discharged from such military service □ (check one) The spouse, parent, child, or dependent accompanying or being with the qualified military voter and am also same school district. Name: □ last name or surname	□ In military service* and by reason of such military service will be absent on the day of regist election. □ In military service and will be discharged from such military service within 30 days of the election. □ (check one) The spouse, parent, child, or dependent of such qualified military accompanying or being with the qualified military voter and am also a qualified voter and a same school district. Name: □ Residential Address in School District: □ street address

^{*} Defined as "the military service of the state, or of the United States, including the army, navy, marine corps, air force, coast guard, merchant marine and all components thereof, and the coast and geodetic survey, the public health service, the national guard when in the service of the United States pursuant to call as provided by law, and the cadets or midshipmen of the United States Military Academy, United States Naval Academy, United States Air Force Academy, and United States Coast Guard Academy."