t

You should only complete this form after you have changed your name. Use **black ink** and write in CAPITALS

Voter change-of-name form

**Changing your name**

We need to see proof of your change of name. Please send us one of the following:

* Marriage or civil partnership certificate
* Overseas marriage or civil partnership certificate

If you do not have any of these, other documents may be acceptable as proof. Please contact us using the details on page 1 of this form.

* Amended birth certificate
* Deed poll

**tt**

Your current full name

1t

D

D

M

M

Y

Y

Y

Y

**Today’s date**

Please tell us the date you changed your name.

Telephone no

(optional)

Email

(optional)

Contact details

4

Providing an email address gives us a quick and easy way to contact you about your application.

**Declaration**

5

To the best of my knowledge, the information in this form is true. I understand that the information I have given on this form will be used on the electoral register. I understand that it is an offence to knowingly give false information in this form, and that I could face an unlimited fine and/or up to six months in prison.

**Signature**

First name(s)

Surname

Your previous full name

2

D

D

M

M

Y

Y

Y

Y

First name(s)

Surname

«PropertyFullAddress»

Please give the address where you are currently registered to vote.

Your address

3