



ELECTORAL DISTRICT NO.			ELECTORAL DISTRICT NAME		
YOUR PRINCE EDWARD ISLAND CIVIC ADDRESS					
CIVIC NUMBER	STREET/ROAD NAME - STREET TYPE	APT. NO.	CIVIC ADDRESS	STREET/ROAD NAME - STREET TYPE	APT. NO.
CITY, TOWN, OR PLACE OF RESIDENCE		POSTAL CODE	CITY, TOWN OR POST OFFICE		POSTAL CODE
FAMILY NAME			GIVEN NAMES		
HOME PHONE NO.	PHONE NO. FOR RECEIVING MAIL-IN BALLOT PACKAGE	FAX NO. FOR RECEIVING MAIL-IN BALLOT PACKAGE			

NOTICE: BY APPLYING FOR A MAIL-IN BALLOT YOU ARE DECLARING THAT YOUR CHOICE FOR VOTING IN THIS PLEBISCITE IS VIA THIS METHOD ONLY.

DECLARATION

I, the undersigned, declare that:

- I will be at least 18 years old by November 28, 2005;
- I am a Canadian citizen;
- I have been ordinarily resident in the province since April 30, 2005.

Date

Signature of Elector

Note: If you are registering by mail or fax, attach a copy of an official document showing your name, address and signature, such as a driver's license or a combination of two documents providing the same information. We will also accept a copy of any official document which has your signature and address upon it.

OFFICE USE ONLY

DATE

SIGNATURE OF AUTHORIZED ELECTION OFFICER

Please return or fax to the following address no later than 6:00 p.m. on Tuesday, November 15th, 2005.

CHIEF ELECTORAL OFFICER
 94 Great George Street
 Charlottetown, P.E.I. C1A 4K4
 Tel: (902) 368 - 5895 Fax: (902) 368 - 6500

Mailing Address:
 Elections P.E.I.
 PO Box 774, Charlottetown,
 P.E.I. C1A 7L3

(This Form may also be mailed or delivered to the Returning Officer in your District)