

Application Form to Vote by Proxy for a Particular Election

Please complete in **BLACK INK and BLOCK CAPITALS** and return to Electoral Services, Wirral Tennis and Sports Centre, Valley Road, Bidston, CH41 7EJ. If you need help filling in this form please phone **0151 691 8046**.

Address where you are registered to vote

Address: _____

Postcode: _____

About you

First name(s) (in full)

Surname

Title (Mr, Mrs, Ms, Miss, Dr, Other)

Your Date of Birth

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Day

Month

Year

Your Declaration

As far as I know, the details on this form are true and accurate. I have asked the person named above who is willing and able to vote for me as my proxy

Signature: **Keep within the border and use BLACK INK**

I cannot supply a signature because *unable to read or write / *disability which is

Date: _____

Who do you want to vote on your behalf?

Name (in full)

Address

Relationship to you (if any)

Proxy vote for which elections?

All elections you are entitled to vote at

Local elections

Parliamentary elections

For election(s) on

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Day

Month

Year

Reason for this application

Proxy's Declaration (optional)

I am capable and willing to be appointed to vote as the applicant's proxy

Signature: _____

Date: _____

Have you had help completing this form?

Name and Address of helper

Postal Proxy

If you think your proxy would be unable to vote in person at your polling station and would like to apply for a postal proxy vote – Please Tick