

**TEAM-ED Personal Registration Add Form**

School District	
Voter Name (Last, First, Middle, Suffix)	
Residence Address including City, State and Zip	Street Number Street Name City, State, Zip
Mailing Address (only if different from Residence Address)	Street Number Street Name City, State, Zip
Date of Birth	
Gender (M or F)	
Registration Date	
Voter Signature	X

NTS Action: \_\_\_\_\_ BY \_\_\_\_\_ Date \_\_\_\_\_