



VOTER REGISTRATION AND UPDATE FORM

FEO EVR_V4

For Official Use Only

Registration Mode:

Offline Kit: ☐ Online Kit: ☐

Voter Card Number:

National Register of Voters: ☐

Local Government Register of Voters: ☐ Verified: ☐

Date of Registration: _____ Registration Venue: _____ Kit Number: _____

Instructions

1. You can only register to vote ***ONCE***.
2. Any Person who submit a false information or attempt multiple registrations may be referred to the relevant authorities for further investigation.
3. Please provide accurate and official details on this application form.
4. All registrations are in person (the person must be present) and completed forms must be submitted to an FEO Voter Registration Official.
5. This form must be completed using blue or black ink only.
6. Tick where applicable and write 'N/A' for any fields not applicable.

Part 1: Reason for Application:

- ☐ New Registration ☐ Correction/Update
☐ Replacement

Reason for replacement of voter card

(Only to be completed for Voter Card Replacement)

- ☐ Stolen ☐ Damaged
☐ Misplaced

Part 2: Personal Details of Applicant

Birth Registration Number: _____

Sex: ☐ Female ☐ Male

Surname: _____

First Name: _____

Other Names: _____

Maiden Name: _____

Date of Birth: _____

Place of Birth: _____

Current Occupation: _____

Parent Details:

Mother's Surname: _____

Father's Surname: _____

Mother's First Name: _____

Father's First Name: _____

Part 3: Contact Details of Applicant

Mobile (1): _____ Home Phone: _____ Work: _____

Mobile (2): _____ Email: _____

Postal Address: _____

Contact Preference: ☐ Email: ☐ Postal

Part 4: Residential Address Details of Applicant

Residential Address:

Residential Province

How long have you been residing at the above address: ☐ Less than 3 months ☐ More than 3 months

Part 5: Details of Next of Kin *(Please provide information of a person over 18 years of age)*

Relationship to you: _____ Full Name: _____

Mobile: _____ Voter Card Number: _____

Email: _____

Residential Address:	
Residential Province	

Postal Address:

Part 6: Polling Venue Details of Applicant for General Election *(to be confirmed by applicant)*

Closest Polling Venue: _____ Polling Venue Code: _____

Category of Disability, if any (optional):☐ **Mobility** *(e.g., difficulty walking, wheelchair user, limb loss, arthritis, muscular dystrophy)*☐ **Hearing** *(e.g., deaf or hard of hearing, cochlear implant user)*☐ **Speech/Communication** *(e.g., speech impairments, stuttering, aphasia, difficulty with verbal communication)*☐ **Visual** *(e.g., blindness, low vision, color blindness)*☐ **Cognitive/Intellectual** *(e.g., learning disabilities, Down syndrome, autism spectrum disorder, intellectual disability, traumatic brain injury)*☐ **Any special requirements:** _____
_____**Part 7: Polling Venue Details of Applicant for Local Government Elections** *(Only fill if you are residing in the municipal boundary for at least 3 months or more)*☐ I agree to register for the Local Government Election.

Municipal Council: _____ Ward: _____

Closest Polling Venue: _____ Polling Venue Code: _____

Part 8: Declaration by Applicant

I, _____ solemnly and sincerely declare that:

1. I am over the age of 18 years;
2. I am a citizen of Fiji; and
3. The information provided in this form is true and accurate to the best of my knowledge and I am aware that it is an offence under section 136 (a) of the *Electoral Act 2014* and Section 127(a) of the *Electoral (Local Government Election) Regulations 2025* to provide false statement or declaration to the Fijian Elections Office.

Signature of Applicant: _____ Date: _____

*(Note: Please read warning below before you sign this Application in the presence of an Election Official.)***For official Use Only:**

Election official Name: _____ Election official Signature: _____

Birth Certificate ☐ *(Tick (✓) only after sighting the Birth Certificate and confirming details in Part 2)*

Birth Registration Number: _____

Valid Photo ID Type: _____ ID Number: _____

Current Voter Card Returned (Only required for application to Correction/Change): Yes / No

Card printed, checked and issued: Yes / No

Signature of the Voter: _____ Date: _____

(Note: Voter to check and confirm on information printed in the Voter Card before signing)www.feo.org.fj**Warning** - It is an offence to make a false statement in this form which amounts to a corrupt electoral practice. The penalty is imprisonment of up to 2 years, a fine not exceeding \$10,000, or both fine and imprisonment, and disqualification from registering as a voter (*Electoral Act 2014*).