

SWORN WRITTEN APPLICATION FOR REGISTRATION

Anyone who is over 21 years of age or will be 21 years by the date of the General Election, November 5, 1964, can register to vote. If you are over 60 years of age, you do not have to pay a poll tax to vote.

1. Write the date of this application. _____
2. What is your full name? _____
3. State your age and date of birth. _____
4. What is your occupation? _____
5. Where is your business carried on? _____
6. By whom are you employed? _____
7. Are you a citizen of the United States and an inhabitant of Mississippi? _____
8. For how long have you resided in Mississippi? _____
9. Where is your place of residence in the District? _____
10. Specify the date when such residence began. _____
11. State your prior place of residence, if any. _____
12. Check which oath you desire to take. (1) General _____
(2) Minister's _____ (3) Minister's wife _____
(4) If under 21 years at present but 21 years by the date of the election _____
13. If there is more than one person of your same name in the precinct, by what name do you wish to be called? _____
14. Have you ever been convicted of any of the following crimes: bribery, theft, arson, obtaining money or goods under false pretenses, perjury, forgery, embezzlement, or bigamy? _____
15. If your answer to Question 14 is "Yes", name the crime of which you have been convicted and the date and place of such conviction or convictions. _____
16. Are you a minister of the Gospel in charge of an organized church or the wife of such a minister? _____

17. If your answer to Question 16 is "yes" state the length of your residence in the election district: _____
18. Write and copy in the space below Section _____ of the Constitution of Mississippi:
 (Instruction to Registrar: You will designate the Section of the Constitution of Mississippi and point out same to applicant.)
19. Write in the space below a reasonable interpretation (the meaning) of the Constitution of Mississippi which you have just copied:

20. Write in the space below a statement setting forth your understanding of the duties and obligations of citizenship under a Constitutional form of government:
 (FOR EXAMPLE: A good citizen pays all taxes, obeys all laws, and votes in every election.)
21. Sign and attach here the oath or affirmation named in Question 12.
22. I, _____, have resided in the _____
 Election District of _____ County.

The Applicant will sign his name here.

STATE OF MISSISSIPPI

COUNTY OF _____

Sworn to and subscribed before me by the witness named _____

on this _____ day of _____, 19____.

 County Registrar

Reproduced above is a facsimile of the form currently in use for Registration.

For further information please contact:

COUNCIL OF FEDERATED ORGANIZATIONS
 507 Mobile street
 Hattiesburg, Mississippi, 39401

Telephone: 582-9993