



2025 Vote by Mail Application

Voter Information

Name: _____ Email(optional): _____

Address of Voter Registration: _____

Date of Birth: _____ Phone Number (optional): _____

Ballot Information

Please check the Box(es) for the elections you would like to receive a mailed ballot:

- May 20, 2025, Annual Town Election
- Any additional Special Town Elections – if called by Select Board
(NOTE: There are no State Elections in 2025)

Ballot Mailing Address



Applicant Signature: _____ Date: _____

If assistance is required, please fill out the bottom of this form-

Assistance

Please fill this out if the voter required assistance in completing the application due to a physical disability.

Assisting person's name: _____

Assisting person's address: _____

This application is being made by a family member:

Relationship to voter: _____

Eligibility:

Any registered voter in the Town of Orleans may use this application to request a mail-in ballot for any 2025 election.

Completing the application:

Voter Information: Provide your name, the address where you are registered to vote, and date of birth.

Ballot information: Choose which ballot(s) you want to receive by mail. Please include your mailing address.

Assistance: If you are helping someone complete the application, or are requesting a ballot for a family member, fill out the section.

Sign your name: If you cannot sign your name, you may ask someone to sign your name in your presence.

Submitting the application:

Please either send or bring the executed application to the Town of Orleans, 19 School Road, Orleans, MA 02653

Deadlines:

The application must be submitted to the Town Clerk's office by 5pm on the 5th business day before the Election.