



Choice to be registered on the
ENGLISH MONTREAL SCHOOL BOARD
ELECTORAL LIST

I, _____
(Print full name in BLOCK letters)

hereby notify the Director General of the EMSB that as per Article 17 and 18 of the Elections Act, I exercise my choice to be registered on the English Montreal School Board Electoral List.

ELECTOR IDENTIFICATION:

Name at Birth: _____
(Maiden name)

Address: _____

Postal Code: _____

Telephone number: _____
RES.: _____
BUS.: _____

Date of birth: _____
Year Month Day

Male: () Female: ()

On September 1st 2010, I did not have a child enrolled in the English Montreal School Board or in a French School Board.

SIGNATURE OF PERSON GIVING THIS NOTICE:

Given in: _____
Municipality

Date: _____

SIGNATURE: _____

PLEASE RETURN THIS FORM TO:

English Montreal School Board
Director General's Office / Elections
6000 Fielding Avenue
Montreal, Qc. H3X 1T4
Phone: (514) 483-7200 Ext: 7262