

## **PETITION TO REGISTER A POLITICAL PARTY**

### **Instructions**

Please print clearly or type.

The political party must complete and file this form with the Chief Electoral Officer.

### **Name of Political Party**

Please provide the full reserved name of the political party.

### **Endorsee Information**

Please provide the full name, address, and telephone information of the person signing the petition (endorsee). Each endorsee must sign this section and the witness must also sign.

### **Please note**

Please refer to Guidelines G41 and PG00 for further information.

Completed petitions forms must be filed within the one year period for which a political party name is reserved. A petition cannot be filed during a campaign period.

### **Please contact us at:**

Elections Ontario  
Election Finances Division  
51 Rolark Drive  
Toronto ON M1R 3B1

Telephone: (416) 325-9401

Fax: (416) 325-9466

Internet Address: <http://www.elections.on.ca>

Toll Free: 1-866-566-9066

Email: [electfin@elections.on.ca](mailto:electfin@elections.on.ca)

The Petition form is open to inspection by any person during normal office hours of Elections Ontario.





**Election Finances Division**

51 ROLARK DRIVE  
TORONTO, ONTARIO M1R 3B1

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Toll Free: 1-866-566-9066  
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Name of Political Party:

**Petition to Register a Political Party**

*Disponible aussi en français.*

**Please read all the information on the form before signing.**

For the purpose of enabling the above-named political party to apply to the Chief Electoral Officer of Ontario for registration in the register of political parties maintained pursuant to the *Election Finances Act*, I hereby:

- (1) certify that as of the date hereof, I am eligible to vote in an election to elect a member to serve in the Legislative Assembly of Ontario\*, and
- (2) endorse the registration of the above-named political party.

Endorsee Information		Witness
Full Name: (please print)	Signature:	Signature:
Telephone:	Date:	Date:
Address: (w/postal code)		
Full Name: (please print)	Signature:	Signature:
Telephone:	Date:	Date:
Address: (w/postal code)		
Full Name: (please print)	Signature:	Signature:
Telephone:	Date:	Date:
Address: (w/postal code)		
Full Name: (please print)	Signature:	Signature:
Telephone:	Date:	Date:
Address: (w/postal code)		
Full Name: (please print)	Signature:	Signature:
Telephone:	Date:	Date:
Address: (w/postal code)		

**\*Section 15 of the *Election Act* states that to be eligible to vote in a provincial election, a person must be:**

- (i) at least eighteen years of age;
- (ii) a Canadian citizen;
- (iii) a resident of Ontario; and
- (iv) not otherwise prohibited by law.