



FSFAPA Voter Registration Form

(VOTER REGISTRATION MUST BE RENEWED EACH YEAR)

ALL foster/adoptive parents are automatically members of the Florida State Foster/Adoptive Parent Association. However, in order to vote in any election, you must register with this form. Please print clearly — if we are unable to read your information, you will not receive a ballot.

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

County: _____

E-mail: _____

Phone: Home (____) _____ **Other** (____) _____

Are you a Foster Parent? _____ **Are you an Adoptive Parent?** _____

This form **MUST** be received postmarked or by e-mail no later than June 1 in order for you to receive a ballot for the election of officers in October/November. If you are not registered, you will not be able to vote.

Send application by snail mail to:

T. LaShaun Wallace
P.O. Box 821442
Pembroke Pines, FL 33082-1442

Send by e-mail to:

fsfapanewsletter@gmail.com