

CASE NUMBER:

# RAFFLE

**FIRST NAME**

**MIDDLE NAME**

**LAST NAME**

**DAY TIME PHONE NUMBER**

**SOCIAL SECURITY #**

**DOB:**

**HEIGHT**

**MAIDEN OR ALLAS LAST NAME**

**EMAIL ADDRESS**

**HOME ADDRESS**

**US STATE IF US CITIZEN, COUNTRY FOR ALL OTHERS**

**GENDER (SELECT ONE)**

**HAIR COLOR**

**EYE COLOR**

**RACE (SELECT ONE)**

BOTH

FEMALE

MALE

BLACK

WHITE

INDIAN/ALASKA NATIVE

ASIAN/ PACIFIC ISLANDER

LATIN

UNKNOWN

**Occupation/ Position (with respect to Requirement)**

**Organization Name (with Respect to Requirement)**

**Organization Address & Event Address**

Driver License is required, please send copy with application.

All appointments must be initiated on our UEP Public Website at: [uenroll.identogo.com](http://uenroll.identogo.com)

Middletown Township ORI #NJ0133100

Local Ordinance Number : 2F17ZY