

FORM 14

section 24

APPLICATION FOR THE REGISTRATION OF A POLITICAL PARTY

CAYMAN ISLANDS

ELECTIONS ACT

(2022 Revision)

To the Supervisor of Elections

Elections Office

I, _____

(Give full first name and surname in block letters)

of _____,

(Give Physical address of Political Party Head Quarters)

(Give postal address of Political Party where communications may be sent by the Elections Office)

On behalf of:

(Full Name of Political Party in block letters)

Abbreviate/ short form name to be shown on Election (Documents in block letters)

hereby apply to register the political party named above.

I certify that the information set out in this application is complete and accurate.

Registration of new party leader, appointment effective: _____

Full Name (Block Letters)

dd/mm/yy

Registration of Party Chairperson (if applicable) appointment effective:

Full Name (Block Letters)

dd/mm/yy

Address where books and records are kept: _____
(state physical location)

Email Address

alternative email address

Official Party Website address

I hereby attach in support of this Application:

- a) Political Party's Constitution;
- b) Political Party's Logo;
- c) Political Party's colour sample;
- d) Copy of Party Resolution appointing the Leader;
- e) Copy of Party Resolution Appointing the Chairperson (if applicable)
- f) A Statement of the Party's purpose; and
- g) Name and Address of Party's Auditor.

I Certify that:

- a) The information set out in this application is complete and accurate;
- b) The Political Party is Not for Profit; and
- c) One of the political party's fundamental purposes is to participate in public affairs by endorsing one or more of its members as candidates and supporting their election.

(Signature of Party Chairperson/Leader)

dd/mm/yy.