

Idaho Voter Registration Form

1 Last Name <i>(Print clearly in black ink.)</i>	First Name	Middle Name
WARNING: Any elector who supplies any information knowing it to be false is guilty of perjury which is punishable by imprisonment and a fine of up to \$50,000.		
3 Are you a citizen of the United States of America? Yes <input type="checkbox"/> No <input type="checkbox"/> Will you be at least 18 years of age on election day? Yes <input type="checkbox"/> No <input type="checkbox"/>		
5 Residence Address (Do not use PO Box or business address. If no street address, describe location of residence by cross streets, section, township, range, or other physical description.)		
6 Mailing address if different from above		
Address where previously registered		
8 <input type="checkbox"/> Check box if Previous Name name change		
9 Do you have any legal disqualifications? Yes <input type="checkbox"/> No <input type="checkbox"/>		
10 Signature - Sign on line below. X Date of Signature _____ month _____ day _____ year		

2 Enter Idaho Driver's License #
 If no Idaho Driver's License, enter last 4 digits of Social Security #
 I have not been issued an Idaho DL number or SSN. ☐

4 Date of Birth
 _____ \ _____ \ _____
 month day year
 Residence in Idaho Male ☐
 Yrs. _____ Months _____ Female ☐

7 Political Party *(Select one):*
☐ Constitution ☐ Democratic
☐ Libertarian ☐ Republican
☐ Unaffiliated - (No party preference)

Telephone Number (Optional)

OFFICIAL USE ONLY
 Precinct _____
 Clerk _____ Date _____

ER-1 Registration Card, Rev. 2011

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