

## South Dakota Voter Registration Form

County

Use this form to: Register to vote or report a name, address, or party change.														
Please print. Complete the entire form. Return this form to your county auditor.														
The deadline for voter registration is 15 days before any election. Your form must be received by the county auditor by this deadline if you are to														
vote in the next election. Within 15 days you will receive a notice of your registration. If you do not, contact your county auditor. Any private person or														
entity registering voters is required to provide you with their contact information. For more information, visit www.sdsos.gov.														
Are you a citizen of the United States of America?														
	Will you be 18 years of age or older on or before the next election?													
1														
	If you checked 'No' in response to either of these questions, do not complete this form.													
	Last Name (Required):	Name (Required): First Name (Required):					ame(s)		Suffix (Jr., Sr., II, etc.)					
2														
		1												
	Residence Address (Required):	Apt. or Lot #	City	ity				State	Zip Code					
3														
	Mailing Address (if different):				City					State	Zip Code			
4					,									
-														
	If you live in a rural area and do not have a street address; if your residence address is a PO Box, rural box, or general delivery; or if you have													
4a	address, please describe the physical location of your residence in writing in the space below, which may include writing the names of the street													
	intersections nearest to where you live and listing any landmarks (e.g., schools, churches, stores) near where you live. If you run out of room or if you want to draw a map to pinpoint your residence and you do not have enough room in the space provided, use the back of this form:													
	שמות נס טרמש מ הומף נס פוויףטווג צטעו רבאעבורכב מוע צטע עס ווטג וומצי בווטעצו רסטוו ווו גווב אמכב פרטעופט, עצב נווב שמנג טו נווא וסוווו.													
			Talankana Number (						· · · · · · /DI		- Duite			
	Date of Birth (Required):					7 SD Driver License (DI				.) # or SD No	n-Driver ID #			
5	Month / Day / Year	6					(Required)							
-														
	Choice of Party – See information in	oice of Party – See information in e box below: 9												
8	the box below:						If you do not have a current SD DL or SD Non-Driver ID, provide the last 4 digits of Social Security Number							
°		3		iD, provide the last 4				the last 4	aigits of Soci	al Security Number				
Choice of Party Information: If you are currently registered to vote in South Dakota and you leave the choice of party field blank, you will remain														
registered with your current party affiliation. If you are not currently registered in South Dakota to vote and you leave the choice of party field blank,														
-	will be entered as a no party affiliation v													
	vious Voter Registration Information Rec	-						-						
Plea	se provide information below if you have recently moved to South Dakota from a different state, moved within South Dakota, or changed your last name.													
	Previous Last Name		First Name		Mid	liddle Name(s)					Suffix			
10														
	Previous Address	evious Address							State	Zip Code				
11														
	Regularia Driver License Number and State					Previous County								
	Previous Driver License Number and State					Frevious county								
12														
13	Would you like to be a precinct election	n wa	orker on election day?		Yes		No							
	· ·				<u> </u>	<u> </u>								
	I declare, under penalty of perjury (2 years imprisonment and \$4,000 fine), that:													
	*I am a citizen of the United States of America;													
	*I will be 18 years of age or older on or before the next election;													
14	*I have maintained residence in South Dakota for at least 30 days prior to													
14	submitting the registration form;													
		ave not been judged mentally incompetent;						Signature Required						
	, .	not currently serving a sentence for a felony conviction; and												
	*I authorize cancellation of my previous registration, if applicable.					Date://								
								nth	Day	Yea	r			