Idaho Political Party Affiliation Declaration Form

I, being a registered voter at the address listed below, do hereby declare that I wish to affiliate with the following political party:

☐ Democratic ☐ Republican ☐ Constitution ☐ Libertarian

I, being a registered voter at the address listed below, do hereby declare that I do not wish to be affiliated with any political party.

☐ Unaffiliated (No party preference)

Last Name: _____ Suffix: _____

First Name: _____ Middle Name: _____

Date of Birth: _____

Residence Address: _____

Street Address City Zip Code

_____ _____

Signature Date

ER-2, Approved Secretary of State, May 2011

Please Return Form To:

Fremont County Elections
151 W. 1st N. Rm 12
St. Anthony, ID 83445