



South Dakota Voter Registration Form

_____ County

Please Return Form To:
Yankton County Auditor
321 W 3rd St., Ste. 100
Yankton, SD 57078

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.

1	Are you a citizen of the United States of America?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	Will you be 18 years of age on or before the next election?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

If you checked 'No' in response to either of these questions, do not complete this form.

2	Last Name	First Name	Middle Name(s)/Initial	Suffix
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3	Residence Address	Apt. or Lot #	City	State	Zip Code
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4	Mailing Address (if different)	City	State	Zip Code
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4a 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 no address, please describe the physical location of your residence in writing in the space below, which may include writing the names of the streets or intersections nearest to where you live and listing any landmarks (e.g., schools, churches, stores) near where you live:

5	Date of Birth (Required): Month / Day / Year	6	Telephone Number	7	SD Driver License (DL) # or SD Non-Driver ID # (Required)
8	Choice of Party – See information in the box below:	9	Email Address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> If you do not have a current SD DL or SD Non-Driver ID, provide the last 4 digits of Social Security Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

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, you will be entered as an independent/no party affiliation voter, which is not a political party in South Dakota.

Previous Voter Registration Information Required Below. Use this section to cancel your previous voter registration:

10	Previous Last Name	First Name	Middle Name(s)	Suffix
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11	Previous Address	City	State	Zip Code
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12	Previous Driver License Number and State	Previous County
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13	Would you like to be a precinct election worker on election day?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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14 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 actually live at and have no present intention of leaving the above address;
- *I will be 18 on or before the next election;
- *I have not been judged mentally incompetent;
- *I am not currently serving a sentence for a felony conviction; and
- *I authorize cancellation of my previous registration, if applicable.

Signature Required

Date: _____ / _____ / _____
Month / Day / Year