

# Wyoming Voter Registration Application & Change Form

New  
  Name Change  
  Party Change  
  Address Change  
  Withdrawal of previous registration

Legal Last Name	Legal First Name	Legal Middle Name	Suffix
Date of Birth	Wyoming Driver's License Number	Social Security Number <small>(Optional, unless no valid WY Driver's License, then last four digits required)</small>	<input type="checkbox"/> I have NO valid WY Driver's License Number or Social Security Number

Political Party Affiliation:  Republican  
 Democratic  
 Libertarian  
 Other (Please List) \_\_\_\_\_

Space provided for Filing Label

1. New Registration Information	Wyoming Home Residence (No P.O. Box Numbers)		City, State, Zip		
	County		County Resident Since		
	Address where you get your mail (if same as Residence, print "SAME")		Mailing City, State, Zip		
	Daytime Phone (Optional)		Gender (Optional) <input type="checkbox"/> Male <input type="checkbox"/> Female		
	E-mail Address (Optional)		Place of Birth (State or Country) (Optional)		
	Do you need assistance to vote? (Optional) <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you interested in being an Election Judge? (Optional) <input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Changes	Former Wyoming Residence (No P.O. Box)	City	State	Zip	Former Wyoming County
	Former Last Name (Optional unless this form is used to make an official change)	Former First Name	Former Middle Name	Suffix	
3. Registration Oath	I do solemnly swear (or affirm) that I am a citizen of the United States; that I am a bona fide resident of the state of Wyoming and this county; that I will be at least eighteen (18) years of age on or before the next election; that I am not now registered in another county or state; that I am not currently adjudicated a mentally incompetent person; that I have not been convicted of a felony, or if I have been convicted of a felony, I have had my civil or voting rights restored by a competent authority; and that the voter registration information contained herein is true and accurate to my best knowledge and belief.  Sign your legal name in full (invalid without signature)				
4. ID & Acknowledgement	<input type="checkbox"/> Proof of Identification Shown	Type of Identification			
	Subscribed and affirmed or sworn to before me by			On	
	Name of Applicant			Application Date	
5. Notes or Comments:					