Household ID Number: _______________

The National Voter Registration Act requires all participants to complete a voter registration disclaimer.

**Instructions:** Please read and fill out this form. If you do not understand part of it, please ask for assistance.

Would you like to register to vote? Yes ☐ No ☐ Already Registered ☐

1. Applying to register or declining to register to vote will not affect the amount of assistance that will be provided by this agency.
2. **If you do not check either, it will be considered that you have decided not to register to vote at this time.**
3. If you would like help in filling out the voter registration application form, staff will help you. The decision whether to seek or accept help is yours. You may fill out the registration form in private.
4. If you believe that someone interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party, or other political preference, you may file a complaint with the county clerk and recorder.

I have read and understand my voter’s registration rights for participation in the Montana WIC Program:

_______________________________________________  ___________________
Signature of Participant/Authorized Representative  Date

Thank you for taking the time to read/fill out this disclaimer. If you have any questions, please don’t hesitate to ask your local WIC staff, or call the state office at 1-800-433-4298.

This institution is an equal opportunity provider.