

\_\_\_\_\_  
Full Name of Party Filing Document

\_\_\_\_\_  
Mailing Address (Street or Post Office Box)

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Telephone

IN THE DISTRICT COURT FOR THE \_\_\_\_\_ JUDICIAL DISTRICT  
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF \_\_\_\_\_

\_\_\_\_\_,  
Plaintiff,  
vs.  
\_\_\_\_\_,  
Defendant.

Case No. \_\_\_\_\_

APPLICATION FOR REGISTRATION  
OF A CHILD CUSTODY  
DETERMINATION

I, (your name) \_\_\_\_\_, the Plaintiff/Defendant, and  
pursuant to Idaho Code §32-11-305, apply for registration of a child custody determination of a  
court of another state.

I swear under oath:

1. I live at \_\_\_\_\_
2. I wish to register a child custody determination in accordance with the Uniform Child  
Custody Jurisdiction and Enforcement Act, I.C. §32-11-305.
3. To the best of my knowledge and belief the order I seek to register has not been  
modified.
4. The name and address of any other parent or person acting as a parent who has been  
awarded custody or visitation in the child custody determination sought to be registered  
is: (name/s) \_\_\_\_\_, (address) \_\_\_\_\_  
\_\_\_\_\_.

5. I understand that false statements in this sworn statement may subject me to the penalties for perjury pursuant to Idaho Code §18-5409, which includes imprisonment in the state prison for not less than one nor more than 14 years.
6. I am of legal age, able to read and write the English language, legally competent, and have sought whatever legal advice I desired before signing this document. I understand the contents of this document, and the same are true and correct to the best of my knowledge and belief.
7. I am furnishing two (2) copies, including one (1) certified copy, of the determination sought to be registered.
8. I understand that notice of my request for registration will be given to the person/s listed in item 4 of this Affidavit.

Date: \_\_\_\_\_

\_\_\_\_\_  
 Typed/printed name of party

\_\_\_\_\_  
 Signature

STATE OF IDAHO                    )  
   ) ss.  
 County of \_\_\_\_\_)

SUBSCRIBED AND SWORN before me on this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
 Notary Public for Idaho  
 Residing at \_\_\_\_\_  
 Commission expires \_\_\_\_\_