
Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

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

Petitioner,

vs.

Respondent.

Case No. _____

APPLICATION FOR REGISTRATION
OF A CHILD CUSTODY
DETERMINATION

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

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.

CERTIFICATION UNDER PENALTY OF PERJURY

I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

Date: _____

Typed/Printed Name

Signature