COUNTY SHERIFF’S OFFICE

REGISTRATION FORM

REASON:

|  |  |  |
| --- | --- | --- |
| [ ] INITIAL REGISTRATION | [ ] ADDRESS UPDATE | [ ] INFORMATION UPDATE |
| [ ] TRANSIENT | [ ] SCHOOL/WORK UPDATE | [ ] MOVING OUT OF COUNTY |
| Full name of registrant:  |
| Last | First | Middle |
| SID#: | Social Security #: | DOC#: |
| FBI#:  | Driver’s License/ID#:  | Passport#: |
| DOB:  | Sex:  | Race:  | Height: | Weight: | Hair: | Eyes: |
| Place of birth:  | Aliases used: |
| Conviction:  | County/state:  | Date: |
| Last registered address:  |
| Street:  | CITY: | STATE:  | ZIP: |
| New address:  |  |  |  |
| Street:  | CITY: | STATE:  | ZIP: |
| Phone Number:  | [ ] Cell [ ]  Home [ ] Message |
| Emergency Contact Name:  | Phone Number:  |
| Mode of transportation: [ ]  Public transportation [ ]  Rely on friends/family [ ]  Own my own vehicle |
| Vehicle info:  |
| Year:  | Make:  | Model:  | Color: | License Plate: |
| [ ]  I am enrolled in school School Name: |
| School Address: |
| Street:  | CITY: | STATE:  | ZIP: |
| [ ]  I am employed Name of company:  |
| Work Address:  |
| Street:  | CITY: | STATE:  | ZIP: |

Offender’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registering Officer’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Badge#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| STAFF USE ONLY |
| [ ]  Identity Verified [ ]  Want/Warrants Checked – Cleared [ ]  Yes [ ]  No – If no, arrested-[ ] Yes [ ]  No[ ]  RMS Updated [ ]  Offender Watch Updated [ ]  Fingerprints taken [ ]  Photo Taken DNA on file with WSP [ ]  Yes [ ]  No - [ ]  DNA Collected  |
| Notes:  |
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