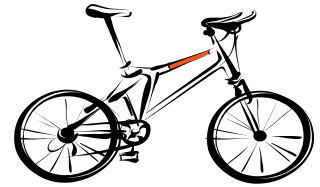




Adams State University Police Department **Bicycle Registration**



Present completed form and bicycle to the ASU Police Department at the address below.
Keep a copy for your records. The information and picture(s) you submit will be used to assist in returning your registered bicycle in the event it is stolen and recovered by the ASU Police Department.

Person Registering Bicycle		
Last Name _____	First Name _____	Middle I _____
Address _____		ID # _____
City _____	State _____	Zip Code _____
Phone Number (_____) _____		e-mail _____
Owner Name if Different Than Above _____		

Bicycle #1	Bicycle #2 / Electronic Device
Brand _____	Brand _____
Model _____	Model _____
Serial # _____	Serial # _____
Color(s) _____	Color(s) _____
Size/Type _____	Size/Type _____
Boys Bike <input type="checkbox"/> Girls Bike <input type="checkbox"/>	Boys Bike <input type="checkbox"/> Girls Bike <input type="checkbox"/>
Speed _____	Speed _____
Registration # _____	Registration # _____
Other Comments _____	Other Comments _____
_____	_____

The above information is accurate to the best of my knowledge	
Signature: _____	Date: _____

Police Department Use Only	
Date Received: _____	Entered By: _____

PLEASE LOCK YOUR BIKES UP
 Adams State University Police Department
 208 Edgemont Blvd. - Suite 2210
 Petteys Hall #1
 Alamosa, CO 81101
Emergency: 911
 Office: (719)587-7901 Fax: (719)587-7994