

## Adams State University

## Police Department





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 item in the event it is stolen and recovered by the ASU Police Department.

Person Registering Device

Last Name	First Name	Middle I
Address		ID #
City	State	Zip Code
Phone Number ()	e-	mail
Owner Name if Different Than Above		
Device #1		Device #2
Device	De	vice
Make		ake
Model	М	odel
Serial #	Se	rial #
Color(s)	Co	lor(s)
Size/Type	Siz	е/Туре
Registration #	Re	gistration #
Other Comments	Ot	her Comments
Value	Va	lue
The above information is accurate to the best of my knowledge		
Signature:		Date:
Police Department Use Only		
Date Received:		Entered By:

## PLEASE LOCK YOUR CARS / DOORS

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