



DEERFIELD POLICE DEPARTMENT BICYCLE REGISTRATION

OWNER INFORMATION

NAME: _____
Last First Middle Initial

ADDRESS: _____

TELEPHONE #: _____

DATE OF BIRTH: _____

BICYCLE INFORMATION

MAKE: _____ MODEL: _____

SERIAL #: _____

COLOR: _____ TRIM COLOR: _____

BICYCLE TYPE: BOYS GIRLS UNISEX

OTHER IDENTIFIERS (LIGHTS, HORNS, ETC.):

Police Department Use Only

REGISTRATION #: _____

REGISTRATION DATE: _____