



FREE!!!!!!

FREE!!!!!!

Riverside Police Department Bicycle Registration Form

Registration Number: (Leave Blank) _____

Social Security Number: (Optional) _____

Name: _____ Date of Birth: ___/___/___

Address: _____
Street

_____ City State Zip

Home Phone: _____ Business Phone: _____

BICYCLE INFORMATION

Serial Number: _____

Make: _____ Model: _____

Style: (Check One) Mountain Road BMX Other

**To register your bicycles, call and make an appointment with
The Evidence Room Custodian
Riverside Police Department
(937)233-1820 Ext. 609**