

“VISITORS FORM”

**Please fill out this form anytime you and your facility are
“VISITED” by unknown, unwanted or undesirable person or persons.**

DATE _____ TIME _____

VEHICLE LICENSE _____ VEHICLE MAKE & MODEL _____

VEHICLE COLOR _____ OTHER FEATURES _____

VISITOR’S NAME _____

GROUP REPRESENTED _____ BADGE NUMBER _____

SEX _____ AGE _____ RACE _____ HAIR COLOR _____

DRESS _____ ARMED _____

OTHER INFORMATION YOU CONSIDER IMPORTANT _____

IF ACCOMPANIED BY LAW ENFORCEMENT PLEASE PROVIDE THEIR

NAME _____ BADGE NUMBER _____

TIME AND DATE SHERIFF CALLED _____

TIME AND DATE MOFED NOTIFIED _____

If there is more than one visitor enter their information in the space below

VISITOR’S NAME _____

GROUP REPRESENTED _____ BADGE NUMBER _____

SEX _____ AGE _____ RACE _____ HAIR COLOR _____

DRESS _____ ARMED _____

OTHER INFORMATION YOU CONSIDER IMPORTANT _____
