



**NEW COLLEGE OF FLORIDA POLICE DEPARTMENT
BICYCLE/LAPTOP REGISTRATION FORM**

PLEASE PRINT AND COMPLETE ALL INFORMATION LEGIBLY

RETURN IN PERSON WITH YOUR BICYCLE/LAPTOP

IF YOU HAVE ANY QUESTIONS PLEASE CALL CAMPUS POLICE 941-487-4210

PERSONAL INFORMATION

First Name _____
Last Name _____
Date of Birth _____ (or) Driver's License # _____

HOME ADDRESS INFORMATION

Street _____
City/State/Zip _____
Home Phone _____
Cell Phone _____

COLLEGE ADDRESS INFORMATION

Residence Hall _____
Room # _____ Box # _____

*Print Name _____ Signature _____ Date _____

Bike Decal _____ Laptop Decal _____

*By registering your bicycle/laptop and affixing a New College of Florida decal to it, you authorize the NCFPD to stop anyone operating or being in possession of your bicycle to confirm ownership or permission to possess the said bicycle/laptop, should an officer suspect that the person having possession not be the owner.

BICYCLE DECAL _____

Student Name _____ Date of birth _____

BICYCLE INFORMATION

Serial # _____

Make _____

Model _____

Color (s) _____

Size _____ Speeds _____

Value \$ _____

Additional Information _____

Owner Initial _____ Date _____

Entered in Informant by _____ Date _____

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LAPTOP DECAL _____

Student Name _____ Date of birth _____

LAPTOP INFORMATION

Serial # _____

Make _____

Model _____

Color (s) _____

Size _____ Speeds _____

Value \$ _____

Additional Information _____

Owner Initial _____ Date _____

Entered in Informant by _____ Date _____