

Office of the Sheriff

Personal Bicycle Registration Form (Print Form, Completely Fill Out Information Below and Keep in Your Records)

Owner's/Bicycle Information

First Name:

Last Name:

Address:

City:

State:

Zip Code:

Home Phone:

Work Phone:

E-mail:

Date of Birth:

Bicycle Make:

Bicycle Model:

**Bicycle Serial
Number:**

Bicycle Color:

Bicycle Frame Size:

Gender of Bicycle:

In the event your bicycle is stolen, please contact authorities and provide this form to the responding Loudoun County Sheriff's Office Deputy.

**** THIS FORM IS FOR LOUDOUN COUNTY RESIDENTS ONLY ****