



SAN DIEGO STATE UNIVERSITY POLICE DEPARTMENT

Bicycle Registration Form

Bicycles operated on campus must adhere to applicable state and University traffic rules and regulations. For more information, please visit the University Police Department's website: police.sdsu.edu/bikeregistrations

Form must be filled in, printed out, and signed by the bicycle owner. Completed forms must be delivered in person with your bike to UPD's front lobby or the UPD Substation during regular business hours: Monday – Friday: 9:00AM – 3:00PM

OWNER INFORMATION:

Last Name: _____ First Name: _____ M.I.: _____

LOCAL ADDRESS:

Street: _____ Apt/Unit #: _____

City/State/Zip: _____ Driver License #: _____ State: _____

Home Phone: _____ Red ID: _____ Email Address: _____

PERMANENT ADDRESS: (If different from local address)

Street: _____ Apt/Unit #: _____

City/State/Zip: _____

BICYCLE INFORMATION:

Make: _____ Model: _____ Colors: _____

Men's: _____ Women's: _____ Speeds: _____ Type: _____ Frame Size: _____

Serial Number: _____ UPD Registration #: _____ Value: \$ _____

Comments: _____

I CERTIFY THAT THE BICYCLE I AM REGISTERING BELONGS TO ME AND WAS OBTAINED LEGALLY. I WILL PROVIDE SUCH PROOF UPON REQUEST. I UNDERSTAND THAT REGISTERING MY BICYCLE THROUGH THE UNIVERSITY'S BICYCLE REGISTRATION PROGRAM DOES NOT GUARANTEE THAT MY BICYCLE WILL BE PROTECTED FROM THEFT OR LOSS. INSTEAD, WHEN YOU REGISTER YOUR BIKE THROUGH THIS FORM, THE SAN DIEGO STATE UNIVERSITY POLICE DEPARTMENT WILL HAVE ACCESS TO ITS SERIAL NUMBER AND DESCRIPTION IF IT BECOMES LOST OR STOLEN.

Signature: _____ Print Name: _____ Date: _____

DEPARTMENT USE ONLY:

Registered By: _____ ID: _____ Date: _____

Registered By: _____ Entered Into RIMS: _____ Date: _____