

Request To Visit

1. I am familiar with the rules governing visits to this facility.
2. I will submit to a search of my person, property or vehicle at any time I am in the BCCF and/or on BCSO property.
3. I do not have in my possession nor in a vehicle, on BCSO property, any dangerous weapons, alcoholic beverages or controlled substances.
4. I have locked my vehicle. There are no minor children in my vehicle or on BCSO property that are not being supervised by an adult.
5. I will not accept or deliver any items to or from an inmate, without prior BCSO approval.
6. Non-Contact visits are limited to a one hour duration. Visits are limited to two (2) per week, per inmate.

****Detailed visiting rules and visitor dress code are posted in the facility lobby and on the BCSO website****

Complete the questions on this card and present to the officer upon completion.

- | | | | | |
|---|-----|--------------------------|----|--------------------------|
| A. Have you ever been convicted of a felony? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| B. Have you ever been sentenced to a penal institution? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| C. Do you have a 209-209A Abuse Restraining order against the inmate you wish to visit? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

I have completed the requested information. By attaching my signature, I understand that all information provided is subject to the penalties of perjury.

Signature: _____

Date: _____

I request to visit: _____
(Print name of inmate, First, MI, and Last)

Name: _____
(Print your name, First, MI, and Last)

Date of Birth _____ Male Female

Place of Birth _____
(City or Town, State and Country)

Social Security # _____

License # and State of Issue _____

Current Residence _____

Telephone _____ License Plate # _____

What is your relation to the Inmate? _____

If not related, what is your relationship? _____
(Example: Friend, Attorney, Clergy, Business, Guardian)

Mail to: BCSO Visits form 6000 Sheriff's Place Bourne, MA 02532