



Sheriff ~ Jarrod Poley

PO Box 565 ~ 396 Lafever ~ Walden, CO 80480

Phone(970)723-42423 ~ Fax(970)723-4740

SEX OFFENDR REGISTRATION FORM

Date_____

Name_____

D. O. B. _____

I swear or affirm that the information provided for my registration is true and correct. I also understand and acknowledge my duty to register as a sex offender, as required by Colorado Statute, until released of this requirement by the Court. Furthermore, I understand my responsibility to:

1. Register within five (5) business days of my next registration due date, which is _____.
2. Register with the Jackson County Sheriff's Office within five (5) business days of any change in my address or register within five (5) business days with the local law enforcement agency where you reside if your new residence is not in the Town & County of Walden.
3. If you change residence to another state, you must de-register with the Jackson County Sheriff's Office before leaving the state of Colorado. You must contact the local law enforcement agency in the new state where you will reside within five (5) business days to register as a Sex Offender, or sooner if required to do so in the new state _____(Offender's initials).
4. If you are arrested for Failure to Register as a Sex Offender after today's date, you are under investigation for being out of compliance with your registration requirement, and your current registration has been deactivated. You must re-register as a Sex offender within five (5) business days of you release from custody, regardless of what your next registration due date is listed above.
5. Failure to register, including failure to register a Sex Offender upon release from custody, failure to cancel your registration when moving out of Colorado, providing any false or incomplete information, or failure to comply with any of the above listed responsibilities, will result in you being charged with Failure to Register as a Sex Offender.
6. You will not be notified by the Jackson County Sheriff's Office that you are due in to register/reregister.

Signature_____

Completed By _____



Offenders Right Index Finger