



# GRANT PARISH SHERIFF'S OFFICE

STEVEN MCCAIN, SHERIFF

205 CYPRESS STREET  
P.O. BOX 187  
COLFAX, LOUISIANA 71417  
PHONE (318) 627-3261 | FAX (318) 627-4114  
WWW.GRANTSO.ORG

## FRIENDS OF GRANT PARISH SHERIFF REGISTRATION

### YOUR INFORMATION

Name	Email	Telephone Number	Preferred Contact Method <input type="checkbox"/> Phone <input type="checkbox"/> E-Mail
Home Address (Street Address, City, State, Zip Code)			
Mailing Address (If Different from Home Address)			

### INDIVIDUAL WITH SPECIAL NEEDS

Full Name	Date of Birth	Race	Gender
Home Address			
Nickname (If Applicable)	Emergency Contact (Name)	Emergency Contact (Telephone Number)	
Special Needs Conditions (All that apply) <input type="checkbox"/> Alzheimer's <input type="checkbox"/> Autism <input type="checkbox"/> Cerebral Palsy <input type="checkbox"/> Dementia <input type="checkbox"/> Down Syndrome <input type="checkbox"/> Other: _____	Special Needs, Calming Measures, Triggers, or Other Behaviors		

### III. VEHICLE/RESIDENCE INFORMATION

#### VEHICLE 1

Year	Make	Model	Color	License Plate	State

#### VEHICLE 2

Year	Make	Model	Color	License Plate	State

#### VEHICLE 3

Year	Make	Model	Color	License Plate	State

#### ENTER ADDRESS FOR DECAL

Address (Street Address, City, State, Zip Code)
---