



### RETURN HOME REGISTRY

REGISTRANT INFORMATION										
SUBJECT FULL NAME						DATE OF BIRTH		AGE		
SEX						RACE		HEIGHT		
WEIGHT		HAIR		EYES		NATIONALITY				
FACIAL HAIR			GLASSES			HEARING AID		RESIDENCE TYPE (HOUSE, APT, CARE FACILITY, ETC.)		
OCCUPATION/GRADE			DOES REGISTRANT DRIVE?			DRIVER'S LICENSE #		DL STATE		
ALIAS(ES)										
EMAIL/SOCIAL MEDIA ACCOUNT(S)										
SCAR, MARK, OR TATOO		LOCATION ON BODY			DESCRIPTION					
ADDRESS						CITY, STATE ZIP		COUNTRY		
HOME										
WORK										
SCHOOL										
PREVIOUS										
PHONE NUMBER										
HOME										
MOBILE										
OTHER										
LANGUAGE(S) SPOKEN										
TRACKING DEVICE(S) (TYPE, BRAND, ETC.)										

VEHICLE INFORMATION					
PLATE NUMBER		STATE	YEAR	MAKE	MODEL
VEHICLE TYPE			BODY STYLE	COLOR	
BICYCLE / BUS ACCESS / ADDITIONAL TRANSPORTATION INFORMATION					


**ADDITIONAL INFORMATION**

GONE MISSING BEFORE?	IF SO, WHERE WERE THEY FOUND?

CLOTHING STYLE

KNOWN HANGOUTS

INFORMATION SPECIFIC TO REGISTRANT (FAVORITE CLOTHING, ITEM ALWAYS WITH REGISTRANT, FASCINATION WITH SPECIFIC ITEMS OR LOCATIONS, SPECIAL INTERESTS, ETC.)

ANY ADDITIONAL INFORMATION YOU FEEL WILL BE HELPFUL FOR OFFICERS TO KNOW TO AID IN SEARCHING AND LOCATING YOUR LOVED ONE.

**EMERGENCY CONTACT INFORMATION**

NAME		RELATIONSHIP TO REGISTRANT	
HOME ADDRESS		CITY, STATE ZIP	COUNTRY
PHONE TYPE	PHONE NUMBER	EMAIL ADDRESS	

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**\*\*\*\* PLEASE INCLUDE 2 PHOTOS OF THE REGISTRANT SUBJECT THAT ARE LESS THAN 30 DAYS OLD \*\*\*\***  
**THE FIRST PHOTO SHOULD BE A CLOSE UP OF THEIR FACE AND THE SECOND PHOTO SHOULD INCLUDE THEIR FULL BODY. RETURN THIS DOCUMENT AND PHOTOS TO THE BUENA PARK POLICE DEPARTMENT FRONT DESK, OR DESIGNATED IPD MEMBER FOR SPECIAL REGISTRATION EVENTS**