

## Lamar County Jail Visitation Registration Form

Inmate's Last Name: \_\_\_\_\_ First: \_\_\_\_\_

### Visitor's Information:

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Suffix: \_\_\_\_\_ Race: \_\_\_\_\_ Sex:  D.O.B. \_\_\_\_\_

Current Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_ Drivers License#: \_\_\_\_\_

State: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Relation to inmate: \_\_\_\_\_

Have you ever been convicted of a Felony?

If yes where: \_\_\_\_\_

Have you ever been arrested?  If yes where: \_\_\_\_\_

Are you currently on some type of supervision from a criminal offense?

If yes where, and with whom: \_\_\_\_\_

If you are a female & have been married, what is your maiden name? \_\_\_\_\_

If you have children with this inmate please state their names and ages:

\_\_\_\_\_

Are you related to any other inmates in this facility?

If yes name & relationship: \_\_\_\_\_

\*All visitors must be over the age of eighteen years of age to visit with an inmate unless accompanied by an adult. Return form to the Lamar County Visitation Department at P.O. Box 806 Purvis, MS 39475.

\*You must have a picture ID with you during visit; otherwise visitation will not be permitted.

**THIS FORM MUST BE APPROVED BY INMATE BEFORE A BACKGROUND CHECK!!!**

Approved by inmate: \_\_\_\_\_ Background Date & Initial: \_\_\_\_\_