Nobles County Jail
VISITING PRIVILEGE APPLICATION FORM

Do not attempt to visit until your application to visit has been fully filled out.

NOTICE: ALL FORMS OF COMMUNICATION ARE SUBJECT TO MONITORING

All spaces must be completely filled out before this visit application will be accepted for processing

Please Print

Visitor: _____DOB _____
First Last Full Middle Mo./Day/ Yr.

Your Address:

_____
Number Street Apt # City State Zip Code

Phone Number:_____ Age:_____
Area Code/Phone Number

ONLY INMATE'S CHILDREN UNDER 18 YEARS OF AGE MAY VISIT. ANY ONE ELSE UNDER THE AGE OF 18 IS NOT ALLOWED TO VISIT. THEY MUST BE ESCORTED BY THEIR PARENT OR LEGAL GUARDIAN

Prior to the day of visiting, a copy of each minor's state/county certified birth certificate must be presented to confirm identification before the minor will be allowed to visit.

FULL NAME AND DATE OF BIRTH of all **CHILDREN UNDER AGE 18** that are eligible to visit:

_____ _____
Full Name DOB Full Name DOB

_____ _____
Full Name DOB Full Name DOB

PROPER IDENTIFICATION IS REQUIRED TO VISIT. Circle ONE of the four identifications listed below.

1. Valid Driver's License from State of Residence
2. Valid Military Photo ID (Active Duty Only)
3. Valid Photo ID Card from State of Residence
4. Valid Passport (If Resident of Foreign Country)

ENTER ID NUMBER AND STATE in this space: _____

THE ABOVE INFORMATION IS TRUE AND CORRECT. I UNDERSTAND THAT PROVIDING FALSE INFORMATION ON THIS FORM IS GROUNDS FOR DENYING VISITING PRIVILEGES. I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS.

Signature_____**Date** _____