



WYOMING DEPARTMENT OF CORRECTIONS	WDOC Form #530	Page 1 of 1
	Visitor's Consent Form	Last Revised: 1/12/12

VISITOR'S CONSENT FORM

Name of inmate I am requesting to visit: _____ WDOC #: _____

I, _____, an approved visitor, have read and understand the Visiting Rules for WDOC Inmate Visiting. I have been given the opportunity to review the rules with a member of WDOC institutional staff, and ask any questions pertinent to inmate visiting.

I agree to comply with all present rules, policies and procedures. I understand that violation of these rules may result in loss of visiting privileges and/or criminal prosecution. I also understand that by signing this form, I give my consent for my property and person to be searched before entering any WDOC institution/facility.

Visitor's Signature

Date

Witnessing Officer's Signature

Comments (staff use only) _____

