Salt Lake County Sheriff's Office
Corrections Bureau

Jail Tour Application / Information

The Salt Lake County Jail ("Jail") is a secure and fully operational correctional facility. By signing and submitting this Application/Release, you are requesting a tour of the Jail and are informed of the following risks. The risks of a Jail tour include but are not limited to the following; assault by prisoners, exposure to offensive or obscene language or behavior, and wet or slippery floors. By signing this form, you hereby waive any and all claims you may have against Salt Lake County, the Salt Lake County Sheriff's Office or its employees that may arise out of or relate to your tour of the Jail.

Procedures for Public Tours

1. Jail Address: 3415 South 900 West. Parking is available off of 900 West in the visitor's parking lot only. Visitors must enter at the Northwest corner of the Jail in the Jail Administration section.
2. Tour groups are limited to twenty (20) persons on a first call, first served basis. Tours occur the first Saturday of every month starting at 8:00 a.m. One application per person is required and must be received by mail or hand delivered to Jail Administration for processing no later than one (1) week prior to tour date. For questions call 743-5050.
3. Leave as much of your personal property secured in your vehicle as possible. Small lockers are available for coats and small personal items. There will not be any weapons, cameras, recording devices or other contraband allowed by visitors touring the jail.
4. **Visitors may be searched before going on the Jail Tour.** Visitors may be required to submit to a rub or pat down search as a condition of entering the Jail. **Visitors may decline to be searched.** Visitors refusing to be searched will not be allowed on the tour and will be asked to leave the jail. All searches will be conducted by a member of the same sex as the visitor and documented in a shift log except as otherwise required by exigent circumstances.
5. **Visitors must wear appropriate attire while taking a Jail Tour.** For health and safety reasons, all visitors must wear shirts and shoes. Other visitor attire must comply with state and local laws.
6. During the Jail tour, all visitors will stay with the Jail tour group and will not separate or lag behind the Jail tour group.
7. Visitors will not communicate in any way with a prisoner, unless allowed by Jail staff. Any disruptive behavior during the tour or refusal to follow rules as instructed are grounds for tour termination and removal from the Jail. Identification is required for the Jail tour. **Current government issued picture identification with a date of birth is required from all visitors sixteen (16) years or older.** Parental consent and accompaniment is required for juvenile person's ages sixteen (16) and seventeen (17). School identification is not valid under this application. Applicants for the Jail tour must provide the information requested on this form. The Sheriff's Office will conduct a criminal background check on all Jail tour applicants. Any person that has served time in any correctional facility in the past year to date, is out on bond, bail, pre-trial release, judges order, has active warrants, or has violated a Jail Visiting rule in the past year to date will not be allowed access.

Name: _____ Home Address: _____

Male / Female DOB: _____ SSN: _____ DL# _____

Printed Parent/Guardian Name: _____Contact Phone #'s: _____

By signing below, I consent to and understand that the Sheriff's Office will conduct a criminal background check and that I agree to and will follow all policy, procedure and rules listed above. My signature also indicates my understanding that this form is a waiver of any and all claims I may have against Salt Lake County, the Salt Lake County Sheriff's Office or its employees that may arise out of or relate to my tour of the Jail. Any false or inaccurate information listed by me may cause my jail access to be denied. **A copy of your driver license or other current government issued identification needs submitted with this application.**

Signature of Juvenile Participant: _____ Age: _____

Signature (Self, Parent or Guardian): _____ Date: _____

----------**Sheriff's Office Use Only**----------

SO# _____ NCIC _____ PSWA _____ UCCH _____ NCICQH _____ DL/ID _____ Check-

Complete/Incomplete Check Date/Time- _____/_____ Recommendation _____ IS# ____

Approve/Deny Signature- _____ Date- _____Approve/Deny Signature- _____ Date- _____