 CHILD SAFETY SEAT REGISTRATION FORM
FOR YOUR CHILD’S CONTINUED SAFETY

Although child safety seats undergo testing and evaluation, it is possible that your child seat could be recalled. In case of a recall it is important that the manufacturer be able to contact you as soon as possible so that your seat can be corrected.

All child safety seats manufactured since March 1993 have a registration form so that owners can provide their names/addresses to the manufacturer. In case of a safety recall, the manufacturer can use that information to send recall letters to owners. Also, child safety seat manufacturers have agreed to maintain owner names/addresses for child safety seats manufactured before March 1993, so they can notify those consumers in the event of a future safety recall. However, in order for the manufacturer to know which child safety seat you own, all of the information on the lower half of this page must be provided.

If you would like the National Highway Traffic Safety Administration (NHTSA) to give your name and address to the manufacturer of your child safety seat, so that you can be notified of any future safety recalls regarding your child safety seat, fill out this form. Please type or print clearly, sign and mail this postage-paid, pre-addressed form.

If you have any questions, or need help with any child safety seat or motor vehicle safety issue, call the U.S. Department of Transportation’s toll-free Auto Safety Hotline at 1-800-424-9393 (Washington DC AREA RESIDENTS, 202-366-0123).

Your Name:___________________________________________ Telephone______________

Your Street Address_____________________________________________________________

City:_______________________, State:_____________ Zip Code:_______________________

IMPORTANT: The following information is essential and can be found on labels on your child seat.

Child Seat Manufacturer:________________________________________________________________

Child Seat Model Name & Number:____________________________________________________________

Child Seat Date of Manufacture:_________________________________________________________________

I AUTHORIZE NHTSA TO PROVIDE A COPY OF THIS REPORT TO THE CHILD SAFETY SEAT MANUFACTURER.

SIGNATURE:__________________________________________ DATE:________________
The Privacy Act of 1974 - Public Law 93-579, As Amended: This information is requested pursuant to the authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or statistical summary thereof, may be used in support of the agency's action.

Please mail to:

U.S. Department of Transportation
National Highway Traffic Safety Administration
DOT Auto Safety Hotline  NAD-40
400 7th Street, SW
Washington, DC  20590