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

Although child safety seats undergo testing and evaluation by the manufacturer and must also meet the requirements of Federal Motor Vehicle Safety Standard No. 213; Child restraint systems, it is possible that your child seat could be recalled.

All child seats come with a registration form so that owners can provide their names and addresses to the manufacturer. In the event of a recall manufacturers are required to notify all registered owners by first class mail that their child seat is included in the recall. Therefore, it is very important that the manufacturer of your child seat has your current mailing address, and all of the information necessary to properly identify your child seat.

The National Highway Traffic Safety Administration (NHTSA) encourages owners of child safety seats to **fill out the manufacturer’s registration form attached to the child safety seat and send it directly to the manufacturer.** However, if you would like NHTSA to forward your registration information to the manufacturer, please provide all of the information requested on the lower half of this form, sign it and mail or fax (202-366-1767) it to: U.S. Department of Transportation, National Highway Traffic Safety Administration, Office of Defects Investigation, Correspondence Research Division (NEF-109), 1200 New Jersey Avenue, SE, Washington, DC 20590.

If you have any questions, or need help with any child seat, please call the U.S. Department of Transportation’s toll-free Vehicle Safety Hotline at 1-888-327-4236 or visit our Website at [www.nhtsa.gov](http://www.nhtsa.gov).

E-mail: __________________________________________

Name: __________________________________________

Address: ________________________________________

City: __________________________ State: ______ Zip Code: __________

Child Seat Manufacturer: __________________________

Model Number: __________________________ Manufacture Date: __________________________

I AUTHORIZE NHTSA TO PROVIDE A COPY OF THIS FORM TO THE CHILD SEAT MANUFACTURER IDENTIFIED ABOVE

(SIGNATURE REQUIRED):_______________________________