

# Safe Rides to Day Care

## Child Care Provider Transportation Information Form

**Please list everyone who drives children to or from your family day care home or center.**

<u>Name</u>	<u>Age</u>	<u>Driver's License</u>	<u>Auto insurance company and policy #</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Please describe all of the cars used to pick up or drop off children.**

<u>Vehicle make, model, year</u>	Number of safety belts in the back seat(s)	
	<u>Lap belts</u>	<u>Lap and shoulder belts</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Please describe how each child is buckled up.** (Use another form if needed.)

<u>Child #</u>	<u>Child's Age</u>	<u>Weight</u>	<u>Safety seat with harness</u>	<u>Booster*</u>	<u>Lap belt</u>	<u>Lap-shoulder belt</u>
1	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____	_____
8	_____	_____	_____	_____	_____	_____
9	_____	_____	_____	_____	_____	_____
10	_____	_____	_____	_____	_____	_____

\*Boosters must be used with lap and shoulder belts.

(Continued on the other side)

**Please describe the car safety seats you are using.** (Refer to child numbers on previous page.)

Child #	Brand name	Model name	Model number	Date made
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Where did you get the safety seats you are using?** (Check all that apply.)

From child's own parent  Purchased new  Purchased used  Borrowed or donated

**Have the safety seats been inspected by a Certified Child Passenger Safety Technician?**

Yes  No  Don't know

**Have you ever attended a class about car safety seats and safety belts?**

Yes  No If yes, please describe (when, where, how long was the class?)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SafetyBeltSafe U.S.A.** P.O. Box 553, Altadena, CA 91003 [www.carseat.org](http://www.carseat.org)  
310/222-6860, 800/745-SAFE (English) 310/222-6862, 800/747-SANO (Spanish)

This program was developed with the support of California Kids' Plates (<http://kidsplates.org>).