

Membership/Subscription Form

Please help us save children's lives by joining *SafetyBeltSafe U.S.A.* today!

(Please print or type)

First Name _____ Last Name _____

Organization _____

Address _____

City _____ State _____ Zip _____

Telephone (Home) _____ (Work) _____

Fax _____ E-Mail* _____

* E-mail address is required to receive passwords for access to Recall List and CPS Tech Update.

Organization or Business Subscriptions	Individual Memberships	Special Gifts
<input type="checkbox"/> \$500 Major Corporation	<input type="checkbox"/> \$100 Contributing	<input type="checkbox"/> \$5,000 Benefactor
<input type="checkbox"/> \$200 Hospital or Other Agency with CPS Techs	<input type="checkbox"/> \$ 50 Supporting	<input type="checkbox"/> \$2,500 Patron
<input type="checkbox"/> \$100 Small Business or Professional Group	<input type="checkbox"/> \$ 35 Basic	<input type="checkbox"/> \$1,000 Sustaining
<input type="checkbox"/> \$ 50 Community Organization		<input type="checkbox"/> \$ Other

All subscriptions include *SafetyBeltSafe News* and are for the calendar year (plus the following year if paid Oct-Dec).

Additional services included with your subscription:

Contact stombrello@carseat.org to request CEUs (provide Tech or Instructor #) or for group rates.

\$50 or more: Recall Update Service (includes access to current, downloadable, printable recall list)

\$100 or more: CPS Tech Access (includes access to new, downloadable, printable instructions)

\$135 Tech Special: All of above, *Safe Ride News* through calendar year, and DVD with mfr. instructions

\$200 or more: CPS Tech Access, *Safe Ride News* through calendar year, *SafetyBeltSafe News* with CEUs for up to 5 Techs, and 100 full-color brochures (a \$20 value)

Check here if you do not want us to send the e-mail updates for which you are eligible.

Check here if you need hard copies. (For best quality, we recommend downloading reproducible masters from our Web site.)

Amount paid \$ _____

Payment method:

Check or money order enclosed.

Purchase Order # _____

Credit Card # _____ Card code (front or back) _____ Exp. Date _____

Name on Card _____ Signature _____

MAIL TO: SafetyBeltSafe U.S.A., Box 553, Altadena, CA 91003 or **FAX TO:** (310) 222-6862

SafetyBeltSafe U.S.A. is a 501(c)(3) non-profit corporation. All contributions are tax deductible. Federal I.D. #95-3676040.

SafetyBeltSafe U.S.A., P.O. Box 553, Altadena, CA 91003 (310) 222-6860 (800) 745-SAFE