



Family Vehicle Safety Program

Court Requirements

(For child restraint violation NRS 484.474)

FEE: \$50.00 per Charge

CASH ONLY (Exact Change)

BRING CAR SEAT TO CLASS

NO CHILDREN PLEASE



**Safe Kids Buckle Up
Child Passenger Safety
Offender Program**
(702) 731-8666

Must call to register

This form must be completed and returned to the
Court **NO LATER Than**

UNLV Child Safety Classes
(702) 895-1780

Call to register or Register On-line at
www.pedsafe.vegas/child-safety-classes

Judge: Chief Judge Cynthia Leung

Court: Las Vegas Municipal Court

Case #: _____

Defendant's Name: _____

DL #: _____

DOB: _____

Defendant's Statement

Class size is limited and space must be reserved TEN days in advance. Contact an agency listed above for class time and dates. You **MUST** bring a car seat to class that is appropriate for the size and weight of the child you were driving when you received the ticket. Present this form to the Instructor, who will **WITNESS YOUR SIGNATURE** and sign below upon your completion of the course.

I agree to attend a car seat education program, have my car seat checked in my vehicle, and present this signed completion form to the Nevada court on or before the due date specified by the court. I understand that I may not attend the class while under the influence of drugs or alcohol.

Defendant Signature: _____ Date: _____ Witness Initials: _____

(DO NOT WRITE BELOW THE LINE)

COURSE COMPLETION

Class Date: _____

Location/Agency: _____

Amount Paid: _____

I verify that the above named defendant completed a program of training in the installation and use of child restraint systems, and that the defendant departed the training with a properly installed child restraint system that is appropriate for the size and weight of the child being transported at the time they received the ticket.

Instructor Name: _____

CPS Tech/Instructor #: _____

Instructor Signature: _____

National Safe Kids Certification

Other Certifying Body