

**Division Of Injury and Violence Prevention
Buckle Up Virginia!
Material Request Form**

Requester's Information (Please Print)

Attention _____

Organization Name _____

Shipping Address (No PO Box) _____

VA

City _____

State

Zip _____

Phone Number _____

Material Description

Quantity

Buckle Up Virginia! Brochure	English_____ Spanish_____
Buckle Up Virginia! Poster	English/Spanish_____
Four Steps for Kids Poster	English_____
Seat Belts Save Lives Brochure	English_____ Spanish_____
Pregnant Women and Seat Belts Brochure	English_____ Spanish_____
Be Safe, Be Smart Buckle Up Activity Book	English_____
Buckle Up Virginia! Growth Chart	English/Spanish_____
2007 Child Passenger Safety Week Packet	English_____
Child Passenger Safety Checklist Form For Safety Seat Inspection Events Only	English_____ (50 forms per pad)

Send or Fax Completed Form To:

Division of Injury and Violence Prevention
Virginia Department of Health
109 Governor St., 8th Floor
Richmond, VA 23219
Attention: Buckle Up Virginia!
Fax: 804-864-7748



Please allow 2-3 weeks for delivery.
Materials are for Virginia residents only.