



Union Fire Protection District  
Post Office Box 463  
Union MO 63084  
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I, understand and agree that the sole purpose of this child restraint seat installation is to help reduce the incidence of the improper installation of car seats; that this inspection is being provided as a free service to me; that this program cannot fully evaluate the quality, safety, or condition of the car seat, the car seat provided, or any component of my vehicle, including the seats or safety belts and that this program cannot fully guarantee my child's safety in a vehicle collision.

However, I understand that properly installed and used child safety restraint systems can significantly reduce fatal injuries in infants, toddlers, and children and that it is important to read both the vehicle and child safety restraint system owners manuals and instructions.

***I hereby release the Union Fire Protection District and all of its agents, employees, and all other persons and legal entities in privity therewith whomsoever they may be, from any and all claims and liabilities which may arise regarding the use of the child restraint seat. The Union Fire Protection District and its employees make no warranties or representations regarding the safety or proper use of any product. The Union Fire Protection District and its employees make no warranties or representations regarding the safety of your vehicle or any condition then existing or to exist in said vehicle. The manufacturer's product manual is the best source of information regarding proper use and installation of any product. This presentation is for educational purposes only, and it is not intended to supersede or replace the directions or guidelines provided by the product manufacturer.***

Signature (Parent / Guardian) \_\_\_\_\_ Date \_\_\_\_\_

Please Print: Name: \_\_\_\_\_ Vehicle: Year: \_\_\_\_\_

Address: \_\_\_\_\_ Make: \_\_\_\_\_

City, state, zip: \_\_\_\_\_ Model: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Seat Model: \_\_\_\_\_

Installation Technician: \_\_\_\_\_