

Parent/Caregiver Name: \_\_\_\_\_

<b>Infant's Race:</b> <input type="checkbox"/> White <input type="checkbox"/> Native American <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Other _____		<b>Infant's Ethnicity:</b> <input type="checkbox"/> Spanish, Hispanic or Latino <input type="checkbox"/> Not of Spanish, Hispanic or Latino Origin		
1. What safe sleep options are in the home?	<input type="checkbox"/> Crib <input type="checkbox"/> Bassinet <input type="checkbox"/> Cribette or Pack'n Play®	<input type="checkbox"/> None	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Caregiver reported	<input type="checkbox"/> Education Provided <input type="checkbox"/> Referral made
2. Where does infant usually sleep/Where will infant sleep?  <i>Sleep environment should be placed away from drapes or curtains, window blinds or shutters, electric cords, furnace vent or radiator, space heater or other heat sources, infant monitor, or any other item that could burn, cut, or become wrapped around your infant.</i>	<b>For Naps:</b> <input type="checkbox"/> Crib <input type="checkbox"/> Bassinet <input type="checkbox"/> Cribette or Pack'n Play® <input type="checkbox"/> Couch <input type="checkbox"/> Recliner <input type="checkbox"/> Swing <input type="checkbox"/> Car Seat <input type="checkbox"/> Bouncy Seat <input type="checkbox"/> Floor <input type="checkbox"/> With an adult, child or pet <input type="checkbox"/> Other	<b>At Night:</b> <input type="checkbox"/> Crib <input type="checkbox"/> Bassinet <input type="checkbox"/> Cribette or Pack'n Play® <input type="checkbox"/> Couch <input type="checkbox"/> Recliner <input type="checkbox"/> Swing <input type="checkbox"/> Car Seat <input type="checkbox"/> Bouncy Seat <input type="checkbox"/> Floor <input type="checkbox"/> With an adult, child or pet <input type="checkbox"/> Other	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Caregiver reported	<input type="checkbox"/> Education Provided
3. Are there or will there be stuffed animals, toys, pillows, quilts, blankets, wedges, positioners, other loose bedding or bumpers in the infant's sleep environment?	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Caregiver reported	<input type="checkbox"/> Education Provided
4. Does, or do you plan to have, your infant ever share a sleep surface with a sibling, adult or pet?	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Caregiver reported	<input type="checkbox"/> Education Provided
5. Does, or do you plan to have, your infant ever share a sleep surface in a bed, couch, recliner or other?	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Caregiver reported	<input type="checkbox"/> Education Provided
6. When infant sleeps, he/she is placed on: Or How do you plan to place your infant to sleep:	<b>For Naps:</b> <input type="checkbox"/> Back <input type="checkbox"/> Side <input type="checkbox"/> Stomach	<b>At Night:</b> <input type="checkbox"/> Back <input type="checkbox"/> Side <input type="checkbox"/> Stomach	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Caregiver reported	<input type="checkbox"/> Education Provided



15. Home visiting program participation status:	<input type="checkbox"/> Currently enrolled	<input type="checkbox"/> Information Provided
	<input type="checkbox"/> Home Visiting Referral made	
	<input type="checkbox"/> Parent/Caregiver declined	

Recipient Name(s) (print): \_\_\_\_\_

Phone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Home address: \_\_\_\_\_  
Street City State Zip Code

**I hereby acknowledge receipt of a portable crib from the Cribs for Kids program for this**

**pregnancy or child** \_\_\_\_\_ **on** \_\_\_\_\_  
(Signature of Recipient) (Date)

Staff Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

Agency: \_\_\_\_\_

## Cribs for Kids® Hold Harmless Agreement

In exchange for the grant of a "Pack-N-Play" portable baby crib, receipt of which is hereby acknowledged, I, \_\_\_\_\_, agree to indemnify, defend and hold harmless the Cribs for Kids® program, as well as officers, agents and employees of the above from all claims or losses accruing or resulting to any person, firm, or corporation who may claim to be injured or damaged as a result of acts or omissions involving the placement and/or use of the portable cribs provided within this Cribs for Kids® program.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

Date: \_\_\_\_\_