



## Fax-back Questionnaire

Attention: Buckle Up America

Thanks for taking the time to give us your opinion. The following brief questionnaire is an opportunity for us to learn what you found most useful about the Child Passenger Safety Week materials, your preferences on format and ways in which we can improve. The questionnaire is voluntary and completely confidential and will take only 1 to 2 minutes to complete.

When completed, please fax the questionnaire at your convenience to: **202-884-8752**

Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2127-0579, with an expiration date of 11/30/2004.

1. How much do you agree or disagree with the following statements? Select the choice that best reflects your own opinion.

- I consider myself a child passenger safety advocate.
  - Strongly agree
  - Agree
  - Disagree
  - Strongly disagree
  
- I am eager to promote the use of booster seats.
  - Strongly agree
  - Agree
  - Disagree
  - Strongly disagree
  
- I found the materials in this planner helpful.
  - Strongly agree
  - Agree
  - Disagree
  - Strongly disagree
  
- I would prefer a printed planner instead of one only posted on the web.
  - Strongly agree
  - Agree
  - Disagree
  - Strongly disagree

2. Which of the following materials did you use? (Check all that apply)

- PowerPoint presentation for community and retailers
- Letter to recruit retailers
- Business newsletter insert
- Business newsletter ad
- Business newsletter blurb
- Point-of-purchase materials for retailers
- Add-a-friend e-mail
- Proclamation
- 4 Steps for Kids logo
- Booster seat posters/flyers

- Press release
- Fact sheet
- Booster seat law article
- Feature article on boy saved by a booster seat
- Resource list
- Lists of State Highway Safety Offices and NHTSA Regional Offices

3. Suggestions for next year's Child Passenger Safety Week:

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