

Primary Safety Belt Partners

Please complete this form at www.saveMOlives.com by clicking on "Become A Primary Safety Belt Partner", or fax or mail it to the address below. You can also type directly into the form, save it to your hard drive and e-mail to the address below.

Yes! We would like to sign on with the Missouri Coalition for Roadway Safety's Primary Safety Belt Partners to provide information and support for primary enforcement of Missouri's safety belt law.

Check appropriate box:

Organization Government Agency Company Individual

Name - Organization/Agency/Company/Individual

E-mail

Contact Person

Telephone

Mailing Address

Fax

City

State

Zip Code

Number of organization members
or company employees

My legislators are:

State Representative

State Senator

Please fax or mail this form to us at:

Primary Safety Belt Partners
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