



Contact Information Form

Dear Cribs for Kids Participant;

Thank you for participating in the Cribs for Kids® Nassau County, NY Program. Should you have any questions, or change in your contact information please call your referral agency's representative listed below. We will be contacting you for follow-up in about 3 months. The Department of Health will reach out when the baby is about 1 year of age to get your feedback on the program and answer any questions you may have regarding safe sleep.

Cribs for Kids Referral agency contact information:

Name: _____

Agency: _____

Phone: _____

Email: _____