

Infant Sleep Equipment Acknowledgment Form

Program ID: _____

On behalf of _____ (the "Program") on this _____ day of _____, 20____,

I confirm that the following is true:

Type of infant sleep equipment		Check the box that applies to the infant sleep equipment used by the Program for infants 12 months and under. If the Program uses both types of infant sleep equipment (cribs and other), check both boxes. By signing this form, the Program agrees to these statements (if applicable).
Cribs	<input type="checkbox"/>	I am aware of the U.S. Consumer Product Safety Commission (CPSC) crib standards (#16 CFR part 1219 for full-size cribs; #16 CFR part 1220 for non-full-size cribs) revised December 2010. I further confirm that the Program is currently providing cribs with a firm surface manufactured for sale as infant sleeping equipment that meets the current CPSC standards for each infant who may be sleeping at the same time at the program.
Other	<input type="checkbox"/>	To the best of my knowledge, all other sleep equipment (not cribs) used at the Program are approved as a firm surface manufactured for sale as infant sleep equipment that meets the standards of the United States Consumer Product Safety Commission.
"Other" sleep equipment includes all infant sleep equipment other than cribs, for example, play yards and floor beds.		

I acknowledge and understand that compliance with current CPSC infant sleep equipment standards is a mandatory requirement for the Program to be in compliance with NAEYC Required Item 5A-928. If granted accreditation, I acknowledge and understand that it is the Program's responsibility to remain in full compliance with NAEYC Required Item 5A-928, and to maintain evidence documenting full compliance if applicable. It is also the Program's responsibility to report to the NAEYC Early Learning Programs any failure to meet this required item throughout any term of accreditation. I understand that failure to meet this required item throughout any term of accreditation will result in the revocation of the Program's NAEYC Accreditation. I further understand that if accreditation is revoked, the Program is no longer in compliance with NAEYC's accreditation policies and procedures and must immediately terminate all use of the NAEYC name, logo, and trademarks, and promptly remove all references to NAEYC and NAEYC Accreditation from program materials and websites.

The Program shall indemnify, defend and hold harmless, and hereby releases and discharges, NAEYC, its affiliates, directors, officers, members, and their respective agents and employees from and against any and all claims, liabilities, demands, suits, costs, expenses (including attorneys' fees) and judgments of whatever nature and description that arise out of or in connection with the Program's infant sleep equipment, CPSC crib standards, Required Item 5A-928, and/or any revocation of the Program's accreditation related to infant sleep equipment.

I hereby represent to NAEYC that I am a duly authorized representative of the Program and have full right to make this acknowledgment and confirmation. I have read carefully this Acknowledgment regarding infant sleep equipment and am signing voluntarily, intending to be legally bound.

Signature of authorized administrator

Name (please print)

Title

Date

Program Name

NAEYC Program ID Number

This form may be sent by e-mail with an electronic signature to requiredcriteria@naeyc.org with a subject line of "Infant Sleep Equipment Acknowledgment Form". Be sure to include your Program ID number. We look forward to receiving your documentation and completing the processing of the visit data in preparation for an accreditation decision. If you have any questions after reviewing this acknowledgment form, you may contact the NAEYC Early Learning Programs at 800/424-2460 or send an email to: accreditation.information@naeyc.org.