

IN THE JUSTICE COURT OF CARSON TOWNSHIP
IN AND FOR CARSON CITY, STATE OF NEVADA

THE STATE OF NEVADA,) Case No.:
Plaintiff,)
vs.) **FAILURE TO USE CHILD RESTRAINTS**
Defendant) **WAIVER OF RIGHTS**
))
)

Defendant's
Initials

I understand that I have been charged with Failure to Use Child Restraints in violation of NRS 484.974. I understand that the State must prove all of the elements of this crime beyond a reasonable doubt. I understand the following current possible punishments, and that they are subject to increased severity for future offences:

1st OFFENSE: A fine of not less than \$100 nor more than \$500 and not less than 10 hours nor more than 50 hours community service. The Court must provide the defendant with a list of approved Family Vehicle Safety Programs. If the defendant successfully completes a Family Vehicle Safety Program within 60 days of sentencing, the fine and community service will be waived.

2nd OFFENSE: A fine of not less than \$500 nor more than \$1000 and not less than 50 hours nor more than 100 hours community service. The Court must provide the defendant with a list of approved Family Vehicle Safety Programs. If the defendant successfully completes a Family Vehicle Safety Program within 60 days of sentencing, the fine and community service will be reduced by one half. **THIS IS A ONE-TIME ONLY REDUCTION.**

3rd OR SUBSEQUENT OFFENSE: Driver's license will be suspended for not less than 30 days nor more than 180 days.

I understand that I have the right to have an attorney represent me, and if I cannot afford an attorney the Court will appoint one, and I am represented as noted below, or, with knowledge of the dangers and disadvantages of self representation, I elect to represent myself.

I understand that I have the right to a speedy and public trial and I give up this right.

I understand that I have the right to confront and question all witnesses against me and I give up this right.

I understand that I have the aright to subpoena witnesses on my behalf and compel their attendance and I give up this right.

I understand that I have the right to remain silent and not incriminate myself and I give up this right.

I am voluntarily pleading guilty/nolo contendere to the offense as state in the first paragraph without any promises of lenience or threats having been made because I am in fact guilty of this offense and/or because I believe the State can provide the offense beyond a reasonable doubt. I understand that any state may use this conviction to enhance the penalty for any future related offense.

I further acknowledge that I have been advised that if I am not a United States citizen, conviction of this offense can result in deportation, revocation of resident alien status, visa or work permit, denial of re-admission to the United States, and denial of naturalization should I apply.

Are you a veteran of any military branch? Yes No

1
2 Defendant's Signature

Driver License No./State

Date of Birth

Date

3 I certify that I am the attorney of record for the defendant; that I have fully discussed the matters herein
4 with him/her and advised him/her thereon; that the representations above are his/her own; that the plea and waivers
were intelligently, voluntarily and expressly made; that I join in the pleas and waivers; and that I stipulate there is a
factual basis for the plea.

5 Waived Counsel

6 Attorney at Law

Date

7 I have addressed the defendant personally, canvassed him/her on the above to include the elements of this
8 offense as supported by the facts, the possible penalties; and his/her Constitutional rights and find that the plea of
guilty/nolo contendere is made voluntarily and with an understanding of the nature of the charge and consequences
of the plea and order that such plea be entered into the minutes of the Court and judgment is entered accordingly.

9 Plea in Absentia Approved

10 Magistrate

Date