

Braille Institute of America, Inc.
Personal Contact Information Opt Out Form

At Braille Institute, we respect your privacy and allow you to restrict usage of your personal contact information.

We do not share the personal information of Braille Institute students, clients, library patrons, volunteers or employees. However, we occasionally make the names and postal addresses of donors who are not students, clients, library patrons, volunteers or employees available to other reputable nonprofit organizations. We have found this to be the most cost-effective method of increasing our donor database and hope that our donors value the information they receive from these other organizations. Donor names that we do share are only made available to carefully screened organizations through third-party mailing agents for a limited use. Other organizations will not have continued access to the donor name and address unless the donor chooses to respond to their initial mailing.

If you prefer that we do not share your contact information with other reputable nonprofit organizations, please check the box below.

Please do not share my personal contact information with other organizations.

If you do not wish to opt out at this time, you may do so at a later date should you so desire.

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Country _____

E-mail _____

Telephone No. _____

Date of Request _____

Signature _____

Mail this form to: Braille Institute, Development Department, 741 North Vermont Avenue, Los Angeles, CA 90029. For questions, please call: 1-800-BRAILLE (272-4553).