



Foundation for Blind Children

AIRC/Library
1235 E. Harmont Drive
Phoenix, AZ 85020
www.SeeltOurWay.org

Teacher Address Information Request 2010/2011

Please remember to always update us during the school year, whenever there is a change in this information. Your personal information will be kept confidential. Thank you.

Date: _____

Name: _____ Title: _____

School: _____ School District: _____

Work phone with area code: _____

Cell phone with area code where we may call you:

Email: _____

Primary mailing address for shipping of educational materials and all AIRC communication:
_____ Zip: _____

Secondary mailing address for shipment of educational materials during closure of above address:
_____ Zip: _____

Summer mailing address if different from above where you can be reached by AIRC staff:
_____ Zip: _____

Summer phone with area code if different from above: _____

Summer email if different from above: _____

If applicable, please state dates when educational materials orders **cannot** be received at any of the addresses given due to school closure or your absence:
