

Braille Tales



Sharing the Joy of Reading



The American Printing House is proud to offer free print/braille books for emerging braille readers age 6 and under.

We believe early exposure to reading develops crucial braille awareness skills and fosters an enthusiasm for literacy in the hearts of young children.

Applicants will receive one free print/braille book every other month until the child's 6th birthday. That's 6 free books a year!

Applicant Eligibility Requirements:

- A child or parent must be blind or visually impaired
- The child must be age 5 or under
- The family must live in the U.S. or U.S. outlying islands

To apply, follow the instructions on the attached application. Or, apply online at www.aph.org/BrailleTales

Books are delivered at the beginning of January, March, May, July, September, and November. You will receive a confirmation email after your application has been processed.

Share the joys of reading with your child! Sign up for Braille Tales today and start receiving free print/braille books!

Braille Tales Application

Please take the time to make sure the form is legible and filled out completely. Incomplete forms cannot be processed. **IMPORTANT: Our books are catered to age 6 and under. If your child is above age 6, but you think they could still benefit from our services, please write so in the additional comments section below.**

Child's Information:

First and Last Name: _____

Birth Date: (mm/dd/yyyy) _____ Gender: _____

Child is a braille reader or is likely to use braille as his/her future reading medium

The parent or legal guardian of the child being registered is a braille reader

Agency or organization providing support services: _____

Parent or Legal Guardian Information:

Title: _____ First Name: _____ Last Name: _____

Street Address: _____ City: _____

Books will be mailed to this address

State/Territory/Possession: _____ Zip: _____

Email: _____

required to complete registration

Phone Number: _____

I am the child's parent.

I am the child's legal guardian. *If you are the child's legal guardian, please indicate whether you are a grandparent, aunt/uncle, foster parent, etc:*

I am a third party filling out application. *Please provide a name/title and contact information*

Direct any questions to Braille Tales Coordinator 502-899-2387



Please send completed forms to:
American Printing House for the Blind
Attn: Braille Tales
1839 Frankfort Ave.
Louisville, KY 40206

