

PO BOX 2329 ANNAPOLIS, MD 21404 | (410) 604-3309 | TOUCHSTONES.ORG

Review Copy Request

Thank you for your interest in the Touchstones® Discussion Project! Please entirely fill out this Review Copy Request form to assist us in approving and processing your review copy. All fields are required.

Guidelines for Providing Review Copies

- Review Copy Request Form must be completed in its entirety and returned to Touchstones® Discussion Project
- Form must be signed by:
 1. Principal or
 2. Asst. Principal or
 3. Curriculum Coordinator (District or School-Based)

Terms of Use for Review Copies

By submitting this form, I, and any others within my organization who have access to these materials, agree to the terms of use printed below.

- By requesting a review copy from Touchstones® Discussion Project, you warrant that you are an administrator, teacher, curriculum coordinator or other educational professional at a certified educational institution and considering using Touchstones curricula in your course offerings.
- If your request for a review copy is approved, you agree that you shall respond to emails or calls from Touchstones® Discussion Project staff asking for your feedback on whether the review copy(ies) provided are suitable for using in your class, school, district, or program.
- Review copies are supplied by Touchstones® Discussion Project as a free resource. All review copies are provided on an "as is" and "as available" basis at Touchstones' sole discretion.

A NOTICE REGARDING COPYRIGHT LAW

Please be advised that all material contained in the Touchstones® Discussion Project's volumes are protected by copyright law. The unlicensed photocopying, reproduction, display, or projection of this material—in whole or in part—is expressly prohibited by law. Copying or use without written permission from the Touchstones® Discussion Project may result in legal action against you and the organization that employs you. In reviewing Touchstones' materials, you and others who have access to these materials agree to these terms of use. Touchstones hopes you are fully satisfied with your purchase, and we look forward to hearing from you as you implement Touchstones in your classroom.



PO BOX 2329 ANNAPOLIS, MD 21404 | (410) 604-3309 | TOUCHSTONES.ORG

I, _____, am requesting the following Touchstones' titles for review

purposes:

.

Customer Information

Date: _____

Name of Purchaser: _____

Position/Title: _____

Name of Teacher requesting materials: _____

School/Org: _____

Grade Level: _____

Classes/Subject(s) Taught: _____

How did you hear about Touchstones? _____

How are you planning to use Touchstones? _____

Timeline for implementation _____

Touchstones training needed _____

Do you have funding for implementation? _____

Touchstones volumes used in the past: _____

School/Org Address: _____

City: _____

State: _____

ZIP: _____

Phone: _____

Cell Phone: _____

Email: _____



PO BOX 2329 ANNAPOLIS, MD 21404 | (410) 604-3309 | TOUCHSTONES.ORG

Approval

Requests must be signed (no e-signatures, please) by one of the following:
(School Principal or Asst. Principal or a School or District-based Curriculum Coordinator)

Name Date

Position School/Org

We look forward to fulfilling your review request and will confirm by email that it has been approved. Please return to us by email schoolprograms@touchstones.org or fax (410) 604-3329.

