**xxx Chapter of the National Federation of the Blind of [affiliate] to Hold [describe event, 3-5 words]**

**City, State (Date of Release):** To help celebrate Meet the Blind Month, the xxx Chapter of the National Federation of the Blind of [affiliate] will hold a [briefly describe event here].

Location:   [Venue Name]

               [Venue address, up to three lines]

Time:        [start time-end time]

Cost [if any]: $xx per person [indicate any exceptions, such as for children or seniors]

[If tickets can be purchased in advance or an RSVP is required, indicate here]

[Quote from chapter or affiliate leader goes here if desired; no more than three sentences].

Meet the Blind Month is our nationwide campaign to increase awareness of, and support for, the National Federation of the Blind (NFB). During October, the members of our affiliates, chapters, and divisions spread the message that blind people can live the lives we want by conducting a variety of outreach activities. These events create opportunities for people to meet the blind of their communities and to recognize that we are vital, contributing members of society.

To learn more about the National Federation of the Blind [affiliate] visit [website and/or social media asset; if none use [www.nfb.org](http://www.nfb.org)].

**###**

***About the National Federation of the Blind***

The National Federation of the Blind (NFB), headquartered in Baltimore, is the oldest and largest nationwide organization of blind Americans. Founded in 1940, the NFB consists of affiliates, chapters, and divisions in the fifty states, Washington DC, and Puerto Rico. The NFB defends the rights of blind people of all ages and provides information and support to families with blind children, older Americans who are losing vision, and more. We believe in the hopes and dreams of blind people and work together to transform them into reality. Learn more about our many programs and initiatives at [www.nfb.org](https://nfb.org/sites/all/modules/civicrm/extern/url.php?u=9733&qid=2005373).

Contact:

[Contact name]

[Contact position or title if any, up to two lines, second line for "National Federation of the Blind of xxx"]

[best phone number]

[Email address]