



May 7, 2021

East Jordan Family Health Center  
601 Bridge St.  
East Jordan, MI 49727

Dear Rachel,

We would like to invite you and your organization to participate in a new program at Bellaire Public Library – *Prescription to Read*. This program would be available to all patrons and community members of the BPL service area (Village of Bellaire, Forest Home, Kearney, and Custer Townships). *Prescription to Read* is funded by a Great Lakes Energy People's Fund Grant.

The goal of this program is to provide authentic, user friendly books and other materials on topics of health, wellness, and mental health concerns to our patrons. In order to make sure we are ordering appropriate materials, we are asking local wellness, medical, and health care professionals to suggest materials we should purchase and ultimately make available to your patients and clients who are also our patrons and community members.

We realize in this crazy time of COVID and everything else you are dealing with this is a big ask. We appreciate any time you may be able to give to this project and we hope you will find it beneficial to yourself, your patients and clients. We have attached a form which could be completed and returned to us with material suggestions, we also have set up a Google form which you can access on our website ([www.bellairelibrary.org](http://www.bellairelibrary.org)) and we are always available by telephone 231-533-8814 or email [bellairelibrary@gmail.com](mailto:bellairelibrary@gmail.com).

As a final piece of this program, all participating organizations would be supplied with *Prescription to Read* notepads for health professionals to write down book suggestions to give to your patients/clients who would then come to the library and know which materials they might find helpful. Please be assured that Bellaire Public Library is held to a high standard of confidentiality as mandated by the Library Privacy Act 455 of 1982. Please feel free to contact us with any questions.

Sincerely,

Cindi L. Place  
Library Director

*Prescription to Read*  
Bellaire Public Library

Prescriber's Name \_\_\_\_\_ Organization/Company \_\_\_\_\_

Contact Info (e.g. telephone, email, address) \_\_\_\_\_

List recommended books/audiobook, DVDs: