



**ESA International Council
Care Connection Directory Information**

ESA's Care Connection was developed as a link to provide a network of services to ESA members, their families and communities. Please complete a form for each ESA member wishing to participate.

Name: _____ **State Council** _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Email Address: _____

I am willing to act as a contact person for an ESA member, family member or friend relocating to my area.

I am willing to act as a contact person for an ESA member, family member of friend needing assistance while visiting my area.

I am willing to act as a contact person for an ESA member who has a family member of friend who lives in my area and may need assistance.

I have some experience and/or expertise in a situation that could be of benefit to an ESA member, her family or friends going through a difficult time.
Area of experience and/or expertise: _____

I would like the name and contact information of an ESA Care Connection member who could help me with the following:

Return to: **Judy Huntley**
2010-2011 IC Senior Past President
2010 40th Street
Rock Island, IL 61201
309-794-9599 email jhun13@sbcglobal.net