

Share Center Non-Profit Application 2024-2025 School Year

**THIS IS A TYPEABLE FORM. SIMPLY INPUT THE INFORMATION
REQUESTED IN EACH OF THE ENTRY FIELDS.**

Non-Profit Organization		Application Date:	
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Board Chairperson		Email:	
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Director/ CEO		Email:	
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Billing Contact Person:		Title/Roll	
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Email:	
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Billing Address:	

Telephone		Fax	
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Organization Website:	
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BEST EMAIL(S) TO RECEIVE OUR MONTHLY NEWSLETTER:

ANNUAL MEMBERSHIP RATE: \$600 Annually

1.	Number of students enrolled in your program/served by your organization	
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OR

2.	Number of clients serviced by your organization	
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PLEASE INCLUDE THE FOLLOWING WHEN MAILING IN YOUR APPLICATION:

1. Your Application
2. A check made out to SHAREcenter
3. A copy of your school's tax id number (Required Each Year)
4. Admin Secretary Name & Email

Admin Secretary:		Phone/Ext	
Email			

Mail your packet to:
SHAREcenter PO BOX 216
Physical Address: 1830 Lisbon Street, Lewiston, Maine 04240
Website: <https://www.sharecenterme.org/>

Jonathan Carsley, Chairman of the Board jcarsley@sharecenterme.org
 Gregory Reed, Treasurer & Members Only Store Manager gregory.reed@sharecenterme.org

Visit us on Facebook for information on our events and updates on items available in our teacher store: <https://www.facebook.com/auburnsharecenter>

Members Only Store Hours are currently: Tuesday and Wednesday 2 to 5 p.m. and the first two Saturdays of each month 9 a.m. to noon

-----*FOR OFFICE USE ONLY*-----

Date Received		Invoice #	
Check #			