

# Share Center Home School Application 2024-2025 School Year

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

Member of a Home School Cohort:	<input type="checkbox"/> YES <input type="checkbox"/> NO	Date:	
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Cohort Leader	
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Email:	
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Parent/ Teacher	
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Email:	
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Billing Address:	

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


## ANNUAL MEMBERSHIP RATE:

Number of Students	Membership Rate
1 to 2 Children	\$150
Each Additional Child	\$50 (Per Student
<b>Total Students</b>	<b>Total Cost</b>

	Student's Name	Age
1		
2		
3		
4		
5		
6		

### 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](mailto:jcarsley@sharecenterme.org)  
Gregory Reed, Treasurer & Members Only Store Manager [gregory.reed@sharecenterme.org](mailto: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 #			