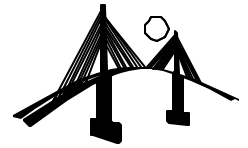




# Host Organization Application



## SHARE Florida

Thank you for your interest in joining SHARE as a Host Organization. This application will help us to get to know you, your neighborhood and your plans for SHARE. Information provided will assist our staff in developing a successful program in the best interests of your church or organization and SHARE.

### SPONSORING ORGANIZATION

Name:

Address:

Phone:

City:

State:

Zip:

Authorized Representative:

Title:

Please provide a description or brochure describing the history and purpose of your church or organization including programs you currently offer.

What are the hours your facility is staffed:

What motivates you to become a SHARE Host Site?

Describe your community:

Based on knowledge of your community, estimate the number of participants expected by the end of a year:

1st month:

3rd month:

6th month:

1st year:

Please provide examples of individual volunteer service opportunities available through your church/organization or in your community:

Do you have a fax machine available to your SHARE Team? Yes No Copy Machine? Yes No

Do you have access to the Internet? Yes No If you have email, what is the address:

Registering and ordering require safe money handling. Can you provide a safe location to collect money?

Can your church/organization provide a bank account for depositing SHARE money?



