

	<h2 style="margin: 0;"><i>Host Organization Application</i></h2> <h1 style="margin: 0;"><i>Golden SHARE Foods</i></h1>	
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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 the year:

1st Month:

3rd Month:

6th Month:

9th Month:

1 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 requires safe money handling, can you provide a safe location to collect money?

Can your Church/Organization provide a bank account for depositing SHARE money?

Can you provide a "seed" fund to cover expenses (such as bank charges, copying, receipt books, gas)?

Describe the room you would use for distribution:

What transportation resources are available to you to pick up food from SHARE?

### Volunteer Team

Please list the names and phone numbers of your prospective team members. Indicate for what part of the SHARE cycle each team member will be responsible for.

**Coordinator:** Team Builder/Delagator

**Community Outreach:** Presentations/Promotions

**Registration:** Clerical/Finance/Records

**Trucking:** Transports food from central warehouse

**Volunteer Service:** Networking/Organizing

**Distribution:** Volunteer Management

Name:

Phone:

Area of Interest or Ability:

Application Submitted by:

Today's Date

If you have any questions or concerns regarding this application, do not hesitate to call us at: **619-590-1692**