



**MEMBERSHIP INFORMATION
THIS IS YOUR INVOICE**

39 Blueberry Road,
Portland, Maine 04102
Phone: 207-699-5565
Fax: 207 699-5566

Email: teacherstore@ruths.org

Effective Year: _____

ANNUAL MEMBERSHIP FEE: *174 students or more - \$3.75 per student; 173 students or fewer - \$650.00.*
Staff List: Please provide a staff list *prior to opening day* that includes: first and last names, title or position, and grade(s) and subject(s) taught so 3Rs may determine individual shopping eligibility.
New Members (other than a public school): Please attach a copy of your 501(c)(3) Determination Letter or other document confirming tax exempt status.

The inventory in the Teacher Store is to be used strictly and exclusively for the benefit of the students in the classroom during regular school hours. Please refer to 3R's Shopping Policies for additional information.

***ALL INFORMATION MUST BE COMPLETED IN ORDER FOR TEACHERS TO SHOP**

Date: _____

School: _____ *District/SAD/RSU: _____

Address: _____
(Street) (Town/city) (Zip)

(P.O. Box if applicable) (County) (Fax #)

Contact Person: _____
(PRINT name) (Telephone) (Email)

Principal's Name: _____
(PRINT name) (Email)

Please check this box if the principal has changed since last year

Students enrolled: _____ # Teachers/staff: _____ Grade Range Served: _____

County(ies) served: _____

FOR OFFICE USE ONLY

Member # _____ Membership fee due: \$ _____
Date Application Received: _____ P.O. Check
Date Payment Received: _____ List Updated Contacts Updated
Notes: _____ Staff List