



P.O. Box 10563 – Harrisburg, PA 17105
 717-238-7318 • www.reentrynow.org

Mission: To reduce recidivism by educating and strengthening the community through coordination of services that the ex-offender needs for successful reentry.

Membership/Donation Form

Name: _____ Title: _____
 Company/Organization: _____
 Address: _____
 City: _____ State: _____ ZIP: _____
 Phone: _____ FAX: _____
 Email: _____ Website: _____

Select Your *Membership/Donor Category

\$25 - Individual Membership*

Benefits of Individual Membership Include:

- Listing in CRESC Membership Directory
- Notification of meetings and events
- Voting privileges

\$75 - Associate Membership*

Nonprofit agencies and other community benefit organizations, for profit businesses, education, and governmental agencies

Benefits of Associate Membership Include:

- Benefits of one Individual Membership
- Agency listing in CRESC Membership Directory
- Participation in funding opportunities.

\$_____ – Donor

One-time gift in any amount to CRESC.

Benefits of Donor Status Include:

- Notification of meetings and events

*Memberships are valid for one calendar year upon initial receipt.

I agree to my listing in the CRESC Membership Directory as indicated above.

Signature/Date

Applicant Signature: _____

Date: _____

Make checks payable to **CRESC**
 Send to your check and this form to:
CRESC, P.O. Box 10563, Harrisburg, PA 17105

Hand deliveries may be made to 500 Maclay Street, Harrisburg (Attn Jeff Woodyard)