



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Financial Assistance Form

- Caldwell
- Downtown
- West Y City
- Homecourt

Please read the following before completing the application.

We require the following documentation:

- A completed YMCA Financial Assistance form and/or Membership Application.
- A copy of your most recent tax return (1040 form). If you haven't filed taxes please explain why. Proof of dependency for children needs to be provided if no taxes are available.
- A copy of your most recent year-to-date pay stub from each adult member of the household who is working.
- Documentation of SSI, SSD, food stamps, AFDC, unemployment, student loans, financial aid, child support, foster care license (if filling out application for a foster child), a personalized letter, etc.
- If you are self-employed, please include your monthly bookkeeping documents.
- If there are any extenuating circumstances that are out of the ordinary, please write a letter of explanation.

You may submit letters from other community organizations from which you receive financial support, although they cannot be used as a substitute for the requested forms listed above. Incomplete applications will delay our ability to serve you.

Individuals who can be included in a family unit receiving financial assistance are only those claimed on current tax returns. Other individuals may apply separately. Consideration will be given to special or extenuating circumstances. Our goal is to take action on applications as quickly as possible.

- Once approved for assistance you have 30 days to activate your membership.
- Documentation is required every 6 months in order to renew financial assistance. Otherwise, financial assistance will decrease.

Primary Adult (required for youth under 18)

_____		_____		_____	
First name		Middle name		Last name	
_____		_____		_____	
Formal first name		Gender		Date of birth	
_____		_____		_____	
Street address		City	State	Zip	
_____		_____		_____	
Home phone		Cell phone		Home Email Address	

(Please turn over)



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Assistance Information

Financial assistance is for:

- Family membership
- Family membership with Child Watch
- Individual membership
- Program membership: _____

How much can you contribute per month? \$ _____

Have you ever received YMCA assistance for membership before?

Yes No

Are you currently receiving YMCA assistance for membership?

Yes No

Adults in household _____
Dependent children in household _____

Income

Monthly gross income from wages/salary \$ _____
Other monthly income (public assistance, child support, etc.) \$ _____
Total household income last year \$ _____

Monthly expenses

Mortgage/Rent \$ _____
Utilities \$ _____
Medical expenses \$ _____
Other expenses:
Child Supp./Alimony \$ _____
Other expenses: Student Loan \$ _____
Other: _____ \$ _____
Total monthly expenses \$ _____

I certify this information is true and complete to the best of my knowledge. I understand it is my responsibility to notify the YMCA regarding changes in my financial and/or membership status. I understand and agree that the YMCA may make contacts to verify this information. I understand that my financial need may be re-evaluated at any time by the YMCA. I authorize employers and/or other income sources to release financial information to the YMCA. I also understand all information will remain confidential.

Print name _____

Signature _____

Date _____

Phone number _____

DOB _____

F.A. Reviewer: _____

Date: _____

- Income tax return
- Current YTD wage stubs
- Other documentation
- Notification: _____

Assistance %: _____
Date to Reapply: _____

Monthly Fees:

Bank/Card Draft: \$ _____
Short-Term fee: \$ _____
Joining fee: \$ _____
Child Watch (1): \$ _____
Child Watch (2+): \$ _____

*Additional:
Towels: \$ _____
Locker Rental: \$ _____
_____: \$ _____
_____: \$ _____

Front desk staff: _____

Date: _____
Date received: _____
Prorated fee: \$ _____
ChildWatch fee: \$ _____
Joining fee: \$ _____
Subtotal: \$ _____
Tax: \$ _____
Total: \$ _____

Bank draft
 Pay in full
(3 to 6 months: _____)

To continue with Financial Assistance,
Please bring updated paperwork to YMCA in _____.