



Superior Douglas County Family YMCA Application for Financial Assistance



The Superior Douglas County Family YMCA is a non-profit organization offering opportunities for personal growth and service to others. Within our available resources, we strive to serve those who can benefit from YMCA memberships and programs. We are able to provide a limited number of scholarships each year from money raised by our Strong Kids campaign and with support from our local United Way.

Assistance is granted on the basis of financial need. We use the federal poverty level as a guideline, along with the information and documentation you provide. All information provided by you is kept confidential.

Our ability to provide assistance is based on the funds we are able to raise each year.

Assistance for membership is reviewed every six months and a new application (with documentation) must be filled out at that time. Assistance may be denied if you do not provide the necessary documents or your income level exceeds the federal poverty level.

Guidelines for completing your request:

- Every request for information within this application must be sincerely answered or an explanation given.
- Proof of all monthly income must be attached to the application.
- We will prioritize all requests made on behalf of youth.
- Priority is given to referrals by social workers, counselors, medical services, etc.

Payment options for membership:

- For membership, applicants will be asked to pay a reduced monthly rate. You are responsible for making your payments.
- If approved, you have 30 days from the date you are contacted to purchase your membership. After that time, you will need to reapply.
- **There are two payment options available:**
 1. You can pay the six month membership in full.
 2. You can have the monthly amount withdrawn from a checking or savings account for the term of your membership. You must have your account information (voided check, savings statement) available at the time you are signing up for your membership. You will need to pay a pro-rated fee at the time you are signing up for your membership.
- We do not accept monthly payments at the YMCA. The above are the only two payment options.

Notification of approved or denied Financial Assistance:

- **You will receive a letter or phone call within two weeks notifying you whether or not you have been approved for assistance. If your application is incomplete, it will be returned to you for completion.**
- After you purchase your membership you will receive a YMCA photo ID card, a policy booklet and schedules for the pools, gymnasium and fitness classes. Your membership includes access to our family and lap pools, gymnasium, racquetball courts, fitness room (16 and older) and the walking/running track.
- Your YMCA photo ID will be mandatory to enter the facility. You can replace a lost or stolen card at the front desk for \$4.00.
- **Memberships may be revoked at any time due to inappropriate behavior. Our Code of Conduct is listed in our policy booklet, please review this prior to using our facility.**

Please fill out completely. We will not review incomplete forms.

Applicant Name: _____ Date of Birth: _____ Phone: _____

Address: _____ City/State: _____

Place of Employment: _____ Work Phone: _____

If you and/or your spouse are unemployed, explain your reemployment plans:

Type of Assistance applying for:

YMCA Membership (check one)

- Adult Current rate: \$39.50 per month plus \$60 joiner fee
- Family Current rate: \$56.50 per month plus \$96 joiner fee
- Single Parent Family Current rate: \$46.50 per month plus \$72 joiner fee
- Youth Current rate: \$17.00 per month plus \$24 joiner fee
- Young Adult Current rate: \$30.50 per month plus \$36 joiner fee

YMCA Program

Name of class _____ Name of class participant _____
Name of class _____ Name of class participant _____

Applications for classes are evaluated by the YMCA staff responsible for the program you are applying for.

Have you received financial assistance from the YMCA before? _____ If yes, when? _____

List all of the persons living in your household. All children must be claimed on income taxes, living in the home, and under the age of 24 to be included in membership.

	<u>Names of members in household</u>	<u>Birth Date</u>	<u>Relationship to you</u>	<u>School/Employer</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

I feel I can afford to pay _____ dollars towards my membership or class. (must be filled in)

