



FINANCIAL ASSISTANCE APPLICATION YMCA OF COASTAL GEORGIA

Is this a new application? or Renewal?

I am applying for (please circle): Membership Childcare Summer Camp Aquatics Sports Gymnastics

Last Name: _____ First Name: _____ DOB: _____

Preferred Phone: _____ Address: _____ Apt #: _____

City: _____ State: _____ Zip: _____

Email: _____ Employer: _____

List the names and birth dates of all dependents and adults living in your household. Ethnicity is for statistical purposes only.

Name: _____ DOB: _____ Age: _____ Relationship: _____

Ethnicity (please circle): Caucasian Afrian American Hispanic Asian Latino Native American Pacific Islander Other

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Monthly Family Income:

Wages, salaries & tips: _____

Unemployment: _____

Social Security or SSI: _____

Child Support: _____

Food Stamps: _____

All other Income (Peach Care, 401K.

Retirement, Alimony, etc.): _____

Total: _____

Family Income Bracket (for statistical purposes):

_____ \$0-\$10,999

_____ \$11,000 - \$25,999

_____ \$26,000 - \$55,999

_____ \$56,000 and above

_____ Unknown

Amount I can pay toward:

Membership _____ Program _____

All applicants are asked to pay their fair share.

Your application will not be processed unless all required documents are submitted with application.

FOR OFFICE USE ONLY

Date Approved: _____ Approved by: _____ Exp. Date: _____

Percentage of Assistance: _____ % Participant Pays: \$ _____ Date Notified: _____

Membership Type: _____ Program: Membership Childcare Summer Camp
Aquatics Sports Gymnastics

Notes: _____

YMCA of Coastal GA

Financial Assistance Agreement

Expectations for members:

Please turn in a completed application with ALL documents that apply to your situation. The YMCA requires up to date income information for verification of need. Please submit as many of the following items related to your situation: two current paystubs, W-2, current tax return, government assistance allocation letter, free/reduced school lunch letter, child support order, public housing lease agreement. Income for each adult living in the household is required. Your application's processing may be delayed for a lack of supporting income documentation.

Explanation: While we understand that your tax income statement or W-2 may reflect a higher income than you are currently getting, it helps us understand your current need and allows us to help you in the best way possible.

After your application has been approved, you will be contacted via phone and/or email. Once contacted you will come to the facility and complete a new membership or registration form. A start-up payment may be required and may include any applicable joiner fee, pro-rates or registration fees.

Financial aid for membership is typically approved for 6 months and will need to be re-evaluated for each new requested period. Financial aid for all other programs will have an assigned expiration date. A new application must be turned in one month prior to expiring of any financial aid. Memberships may be subjected to draft at the full monthly rate at the end of the approved term. All documentation is required to re-apply.

While your membership is accessible at all of our branches, any financial aid given for programs is limited to the branch you applied at. This financial aid is not transferable and you must renew at the branch that you would like to participate at.

The financial assistance program is supported by the generosity of others who donate to our Annual Campaign. Funding may vary year to year as resources vary from branch to branch.

Financial assistance is temporary, so those applying over an extended period of time may be approved for a lesser amount with each application, even if their income doesn't change.

Expectations from the YMCA:

You may be contacted more than once if you are missing documentation. Once all the proper information is turned in and you are approved you will be contacted by the branch you applied with.

Financial aid will typically be honored for 6 months from approval date. We will attempt to contact you as you near your expiration date; however, it is your responsibility to submit a renewal application in a timely manner. A new application must be turned in one month prior to expiring of any financial aid. **Memberships may be subjected to draft at the full monthly rate at the end of the approved term.** If you do not wish to renew your membership, you will need to fill out a cancellation form to stop your monthly draft.

Cancellation policy: YMCA requires 30 days written notice to cancel any membership draft. You may view the complete policy outlined on our membership enrollment form. Some programs require a 2 week written notice to cancel services. Please review your program manual for the complete policy.

I have read and agree to the terms of this application. All information provided by me is true to the best of my knowledge. I understand that additional information can be requested of me at anytime. The YMCA reserves the right to refuse assistance to any applicant.

Member signature:

Print Name: _____

Sign Name: _____

Application Date: _____

YMCA of Coastal GA

Financial Assistance Policy

No one who resides within our service area will be denied access to membership or programs due to their inability to pay. We can help your family keep a healthy, positive attitude during periods of financial hardship by reducing the stress and minimizing the feeling of sacrifice.

Help us understand: Income documentation does not tell us about your situation. Please share with us any hardships or issues that you would like us to consider in making our determination. Our goal is to help each applicant in the best way we can.

Financial Assistance Checklist: Make sure you have all the documents you need when completing your application. If you are not currently receiving one of the listed items, please circle N/A.

Two current paycheck stubs for ALL adults that living in the household.	YES	N/A
A copy of your most recent W-2 or Tax Return	YES	N/A
A copy of your child Free/Reduced lunch letter from your Board of Education	YES	N/A
A copy of ALL State or Federal government aid received (Examples: Social Security, SSI, VA, Food Stamps, Medicaid, Disability)	YES	N/A
A copy of child support payments or a child support order (Even if support is not being paid or past due)	YES	N/A
Current lease agreement for Public/Section 8 Housing	YES	N/A
Current class schedule & loan/grant information for full time students attending college or tech schools and who are not working.	YES	N/A
Any additional letters or documents you would like us to consider.	YES	N/A