



## LEARN ABOUT THE PROMISE TO OUR COMMUNITY

### What is YMCA financial assistance?

The YMCA of Greenville & Hunt County believes in providing membership and program services to all who desire to participate. The YMCA's financial assistance program, supported in part by the annual Strong Kids Campaign, uses all available resources to provide support to those who have financial need and qualify for assistance.

### Who is eligible for YMCA financial assistance?

Anyone may apply for financial assistance. Approval of the application is made on an individual basis. The YMCA uses a sliding-fee scale based on total household income and number of dependents. The scale assists the staff of each branch in determining the amount of scholarship awarded and its applicable time frame.

### Is it possible to join the YMCA for free?

The YMCA believes a strong sense of ownership and pride is developed when the financial assistance recipient contributes to the cost of their YMCA involvement. Therefore, applicants will be asked to pay a portion of the fee for the requested service.

### How can I give back to the YMCA?

You can give back to the YMCA in many ways. Each YMCA has volunteer opportunities available from coaching a youth team to working on the annual Strong Kids Campaign. Check with your Executive Director to find out how you can help!

### How will the financial assistance amount be determined, and how quickly can I expect to receive financial assistance?

Scholarships are determined on an individual basis using a sliding-fee scale guideline to assist in designating the amount of assistance. Once the financial assistance application and required documents have been submitted to the designated staff member, the YMCA will contact you within two weeks to share the outcome of your application.

### How long will the financial assistance continue?

Need for financial assistance is assessed at the time of request and reviewed on a regular basis.

### Who will be reviewing my application?

The Executive Director and his/her designee are the only people who will review your application. All information is handled confidentially.

### May I do anything in return for this assistance?

Yes! At the YMCA, youth and adults are encouraged to volunteer. Also, YMCA donors appreciate learning how their contributions are used. Submitting a short note about how you or your family benefited from the financial assistance is appreciated.

## STRONG KIDS CAMPAIGN

A YMCA Initiative



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# ALWAYS HERE FOR YOU

FINANCIAL ASSISTANCE  
YMCA OF GREENVILLE & HUNT COUNTY



# FINANCIAL ASSISTANCE APPLICATION



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

This document must be completed in full for consideration. All of the following information must be included before processing will occur:

- Bring your last two paycheck stubs from all employers of household members
- Bring your most recent W2 and the most recent income tax return (1040) for the household
- Proof of all public assistance for household members
- All household income sources and assistance must be documented and included with this application. Any special circumstances must include a written & signed letter.

### For Office Use Only

Gross Yearly Income \_\_\_\_\_  
 Total Household Members \_\_\_\_\_  
 F.A. Approval % \_\_\_\_\_  
 Date Approved \_\_\_\_\_  
 Approved By \_\_\_\_\_  
 Applicant Contact Date \_\_\_\_\_

## Personal Information (Please Print)

Name of Person Receiving Assistance	Birthdate	Gender
Spouse's Name (if applicable)	Birthdate	Gender
Address	City	State
Day Phone	Evening Phone	Mobile Phone
Email Address		
Number of Adults in Household _____	Number of Children in Household _____	

## Dependents Living at Home

Name	Birthdate	Gender
Name	Birthdate	Gender
Name	Birthdate	Gender
Name	Birthdate	Gender

Is anyone in your household receiving any educational financial assistance? Yes No  
 Documentation of this financial assistance must be included with application.

### Household Monthly Income

Wages \_\_\_\_\_  
 Social Security \_\_\_\_\_  
 Food Stamps \_\_\_\_\_  
 Unemployment \_\_\_\_\_  
 Child Support/Alimony \_\_\_\_\_  
 Pension/Retirement \_\_\_\_\_  
 All Other \_\_\_\_\_  
**Total** \_\_\_\_\_

### Household Monthly Expenses

Rent/Mortgage \_\_\_\_\_  
 Groceries \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Utilities \_\_\_\_\_  
 Car Payments \_\_\_\_\_  
 Medical \_\_\_\_\_  
 All Other \_\_\_\_\_  
**Total** \_\_\_\_\_

### Please circle ALL areas that you will need assistance in:

Membership \_\_\_\_\_  
 Youth Sports \_\_\_\_\_  
 Summer Camp \_\_\_\_\_  
 Aquatics \_\_\_\_\_  
 Other – Please List \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I affirm to the best of my knowledge that the above information is true and complete. I agree to provide income documentation in full, and for all members of my household. I understand that this application expires annually, and I must reapply as requested by the branch to continue receiving assistance.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Are you willing to volunteer/share your story? Yes No

Please return this application to the YMCA.