

Financial Assistance Application

Application must be filled out completely.

Please print clearly and include all required paperwork listed on the reverse side of this form.

Applicant Information

I am applying for which type of membership (circle one): **Family** **Single**

Last Name: _____ First Name: _____ Home Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Employer: _____ Work Phone: _____

Hourly Wage: \$ _____ Annual Income: \$ _____ # of people living in household: _____

Spouse or Other Wage Earner Information

Last Name: _____ First Name: _____ Home Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Employer: _____ Work Phone: _____

Hourly Wage: \$ _____ Annual Income: \$ _____

List all dependents or other people living with you (If needed please attach another piece of paper):

| First Name | Last Name | Date of Birth | Relationship | Workplace |
|------------|-----------|---------------|--------------|-----------|
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| | | | | |
| | | | | |
| | | | | |

Monthly Household Income:

| | | | |
|----------------|--|------------------------------|--|
| Wages: | | Social Security or SSI: | |
| Worker's Comp: | | Government Housing: | |
| Food Stamps: | | Pensions / Annuities: | |
| Child Support: | | All Other Income: | |
| Unemployment : | | Total Monthly Income: | |

Have you ever been a YMCA member: YES___ NO___ Which Branch? _____

Why do you want to participate as a YMCA member? _____

List special circumstances that you feel should be taken into consideration during review of this application:

Signature of Applicant: (Parent or Guardian if under 18) _____

Date of Application _____

Submitted: _____

How to Apply:

1. Applications are available at the Membership Desk during business hours. All application records will be kept confidential.
2. Applicants **MUST COMPLETE** the financial assistance form.
3. Applicants **MUST SUPPLY PROOF OF HOUSEHOLD INCOME with updated copies of ALL of the following that apply to the applicant and immediate members of the household which include but are not limited to the following:**
 - W2
 - Pensions / Annuities
 - Worker's Comp Benefits
 - Food Stamp Benefits
 - Alimony Payments
 - Tax Return - Front Page Only
 - Veteran's Pensions / Benefits
 - Medicare Benefits
 - AFDC Benefits
 - (3) Current Payroll Check Stubs
 - SSI Benefits
 - Unemployment Benefits
 - Government Housing Benefits
 - Child Support Payments
 - Employer Letter Stating Income

The YMCA reserves the right to refuse assistance to any applicant.

A YMCA Scholarship is for a 6 month period. If at any time during this period the membership or related programs are cancelled for any reason, the scholarship becomes null and void.

YMCA of Central Texas Financial Assistance Policies and Procedures

Policy Statement:

It is the mission of the YMCA to provide services for any person or family who desires to participate at the YMCA, regardless of the ability to pay the standard joiner's fee, monthly membership rate, or program fee.

Eligibility:

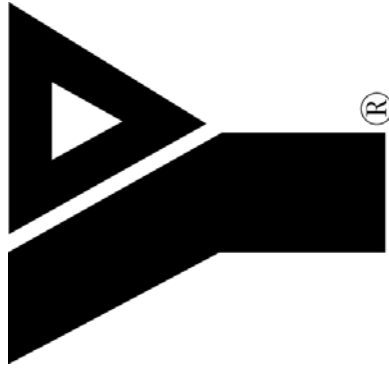
1. Applicants must reside in the Doris Miller / Waco Family YMCA service area, which includes all of McLennan County.
2. Assistance will be granted on the basis of financial need and the funds available and reserved for scholarship usage at the Doris Miller / Waco Family YMCA.
3. The YMCA believes a strong sense of ownership and pride is developed if the recipient has contributed to the cost of their YMCA involvement. Therefore, applicants will be required to pay some portion of the fees associated with their request for financial assistance. Volunteer participation will also be encouraged when possible.
4. **Deadline to submit application for financial assistance is the 15th of each month to be awarded at the beginning of the next month if applying for membership. If applying for program, please see Program Director for information.** Financial assistance will only be for the program / membership for which you apply. An application must be submitted with proper documentation to be processed. **The application will be void if proper documentation is not received or falsification of application occurs.** You must reapply at the end of the scholarship period.

YMCA of Central Texas

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Family YMCA
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Waco, TX 76704
(254) 752-1605

Waco Family
YMCA
6800 Harvey Dr.
Waco, TX 76710
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