

## Mission of the YMCA

To put Christian principles into practice through programs that build healthy body, mind and spirit for all.

### Open Doors

The Union County Family YMCA is a not-for-profit, health and human service organization committed to helping people reach their full potential in spirit, mind and body. YMCA's are here to serve people of all ages, backgrounds, abilities, and income. The YMCA is community-based and believes that its programs and services should be available to everyone. That's why the YMCA offers an OPEN DOOR program. OPEN DOORS is a sliding fee scale that is designed to fit each individual's financial situation. 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, you will be asked to pay some portion of the fees.

The funds available for OPEN DOORS are made possible through the generosity of our members and donors in the YMCA Annual Sustaining Campaign and from United Way funding.

The Union County Family YMCA requires that individuals provide the requested information regarding income, family size and necessary expenses so that it can provide financial assistance in a fair and consistent manner. Of course, all information will be kept confidential. The YMCA also requires that you reapply when requested to keep information on your application updated. Assistance will be reviewed for eligibility every six months.

Your fees are subject to increase when you reapply. If you do not reapply when requested your enrollment may be terminated.

#### **To process your application, we will need the following information (bring all that apply):**

- Copy of last year's tax return or a copy of your 4506-T form
- Copy of last two pay stubs – if not working, a copy of the last 3 months of bank statements
- (or) Copy of social security or disability checks (or copy of bank statements showing amount of automatic monthly deposits)
- Documentation of any Federal Assistance like food stamps, rent subsidy, or Aid to Dependent Children cash assistance
- Documentation of Child Support

If you are applying for Latchkey Childcare or Summer Camp you MUST first apply with Job and Family Services. To contact Job and Family Services, please call 937-644-1010.

The YMCA's Executive Director, based on a thorough review of the application, will determine financial assistance eligibility. Please allow up to 30 days to process your application. You will be notified by telephone or mail if your application has been approved or if you need to submit additional information. Scholarships will be awarded on a first come, first served basis, subject to available resources.

The YMCA scholarship program will pay for the program only. Any uniform fees, registration fees, late fees or field trip fees are the responsibility of the family or individual signing up.

All YMCA members receive the same membership benefits, regardless of whether or not they are receiving assistance. YMCA members can feel great knowing that they are involved in an organization that cares greatly for the health and well-being of people and is committed to building strong kids, strong families, and strong communities.



Union County Family YMCA  
1150 Charles Lane  
Marysville, OH 43040  
937-578-4250



**Union County Family YMCA  
Request for Financial Assistance**

Applicant's Name: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Employment Status:      Full Time \_\_\_\_\_      Part Time \_\_\_\_\_  
    Unemployed \_\_\_\_\_      Retired \_\_\_\_\_

Employer: \_\_\_\_\_ Business Phone #: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Spouse's Name (if applicable): \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Employment Status:      Full Time \_\_\_\_\_      Part Time \_\_\_\_\_  
    Unemployed \_\_\_\_\_      Retired \_\_\_\_\_

Employer: \_\_\_\_\_ Business Phone #: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

List the names of EVERYONE who lives in your household:

<u>Name</u>	<u>Age</u>	<u>Date of Birth</u>	<u>Relation to You</u>

Monthly Income (Gross):

Wages, Salaries, Tips	\$ _____
Spouses Wages, Salaries, Tips	\$ _____
Unemployment	\$ _____
Social Security	\$ _____
Child Support	\$ _____
AFDC	\$ _____
Food Stamps	\$ _____
Other	\$ _____
Total	\$ _____

Monthly Expenses:

Rent / Mortgage	\$ _____
Utilities	\$ _____
Food	\$ _____
Car / Insurance	\$ _____
Child Support	\$ _____
Medical	\$ _____
Child Care	\$ _____
Other (Specify)	\$ _____
Total	\$ _____

If your child(ren) attends Latchkey or Summer Camp, have you applied with Job and Family Services? YES / NO

Job and Family Services Case Worker \_\_\_\_\_ JFS Amount \_\_\_\_\_ week / month.

Please provide verification of approval and amount or verification of denial.

What type of membership are you applying for?:

\_\_\_\_ Adult \_\_\_\_ Married Couple \_\_\_\_ Family \_\_\_\_ Sgl Parent \_\_\_\_ Sr. Adult \_\_\_\_ Sr. Family \_\_\_\_ Youth

Explain in more detail why you would like to be considered for assistance at the Union County Family YMCA.

I certify that the above information is true and complete to be best of my knowledge. I agree to inform the YMCA immediately of any changes in my income or family size. I understand that false or incomplete information could jeopardize my financial assistance.

Signature \_\_\_\_\_

Date \_\_\_\_\_

