

Greensburg YMCA 101 South Maple Ave Greensburg, PA 15601 724-834-0150

## Greensburg YMCA Financial Assistance Policy and Procedures

The Greensburg YMCA offers quality, affordable programs and services designed to benefit people of all income and backgrounds. The Greensburg Y provides financial assistance as funds are available to individuals and families who otherwise might not be able to participate in YMCA membership or programs. The YMCA's financial assistance program is made possible through contributions to the organization's annual campaign.

All information submitted is considered confidential and will be seen only by staff administering the financial assistance policy. In no way will anyone receiving assistance be identified publicly without their permission.

Please read the application completely and enclose all the information needed to process your request for a reduction of fees. Review the checklist to ensure you have included all the necessary documentation when you return the application to the YMCA. Incomplete applications will not be processed, which may delay your membership or enrollment in the program.

You should expect up to a 30 day processing period. You will be notified by email when your financial assistance is awarded.



DATE:				D FIRST T	IME APPLICAN	IT 🗆 REN	EWAL APPLICANT	
APPLICANT'S NAME:				BIRTHDATE:				
ADDRESS:				CITY:			ZIP:	
PHONE	NUMBER:			EMAIL:				
HOW N	ANY ADULTS	IN HOUSEHO	DLD?					
MARIT	AL STATUS:	Single	Married	Separated	Divorced	□ Widowed		
FINAN	CIAL ASSISTA	NCE REQUES	STED FOR:					
	PROGRAMS:							
	□ Gymnastics	□ Sports	□ Aquatics			Summer Carr	η	
		Other						
	MEMBERSHIP	:						
	□ Youth □ /	Adult 🗆 0	College 🗆 S	Single Parent Fam	nily 🗆 Fami	ly 🗆 Senior	Health Center	
FAMIL	Y MEMBERS: ( <u>N</u>	<u>4UST</u> be listed	d as dependents	on tax return)				
Name:			Date	of Birth:	Relat	ionship:		
Name:			Date	of Birth:	Relat	ionship:		
Name:			Date	of Birth:	Relat	ionship:		
Name:			Date	of Birth:	Relat	ionship:		
Name:			Date	of Birth:	Relat	ionship:		

I hereby release all the above information and attest that it is current and accurate to my knowledge. If approved, my financial assistance will expire in six months from the original join date. Every six months I must submit a new application with current financial information to be eligible for financial assistance. I understand if I fail to submit a new application during my renewal period, the membership will automatically be terminated without notice.

Any financial applicants for the Child Development programs (ECLC, BASE or Summer Camp) must apply for CCIS (Child Care Information Services). A letter of acceptance or decline must be provided within 30 days of registration.

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## Signature of Applicant

The following documentation must be provided in order to process the application:
<ul> <li>Federal Income Tax Return/W-2s</li> <li>Copies of Proof of ALL household income (Including three current paystubs, letter of assistance from SSI or unemployment, cash assistance and food stamps documentation.)</li> </ul>
The review process can take up to 20 days. Applicants

Income Information - Gross Income				
Wages, Salaries and Tips	\$			
Unemployment Compensation	\$			
Social Security Compensation	\$			
Child Support	\$			
Food Stamps	\$			
Alimony	\$			
Other	\$			
Total Monthly Income	\$			

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