

Waynesboro Area YMCA <u>OPEN DOORS</u> Financial Assistance Program

### Membership, Athletic Club, General Programs, Child Care and Day Camp

The Waynesboro Area YMCA is a non-profit, Christian service organization committed to helping people reach their full potential in spirit, mind, and body. Our OPEN DOORS program is designed to fit each individual's specific financial situation and provide assistance based on several household factors and using a sliding fee scale.

While our Y is committed to helping those in need, we also believe in a strong commitment and a firm sense of ownership and pride so there are no totally FREE memberships or programs; rather each individual will be required to contribute to the cost of their YMCA involvement.

Our Y requires that all individuals provide information requested on the attached form so we can accurately assess your need and provide assistance in a fair and consistent manner. All information will be kept confidential. The Y also requires re-application annually. Your allocation and fees are subject to increase when you re-apply. Your membership/programs will expire if you do not re-apply and are approved.

Please note: We attempt to assist as many individuals and families as possible with the available funds. Our allocation process is monitored closely to ensure viability of the program.

INSTRUCTIONS [you must provide copies of the following]

### **Copy of current Federal tax return** [1040].

If you do not have a copy, you must obtain one by calling the Internal Revenue Service

□ Copies of last four [4] pay statements for all working adults

IF YOU ARE UNEMPLOYED, you must provide a copy of your award letter stating when your benefits begin and amount you will receive.

- Documentation of any and all additional income including Federal and/or State assistance such as food stamps, unemployment compensation, alimony, child support, worker's compensation, etc.
- □ Description of any unusual expenses or circumstances.
- □ If submitting application as a single parent with attached, filed joint tax return, you must provide documentation of separation or divorce.

All information must be submitted in a sealed envelope to the attention of Membership Administrative Assistant. Please allow 10-14 business days to process your application.

Be sure to thoroughly review the Open Doors procedures on the following pages



# Waynesboro Area YMCA <u>OPEN DOORS</u> Financial Assistance Program

## **Open Door Procedures**

1. Complete the attached Open Doors application. All financial information and application must be submitted in a sealed envelope to the attention of the YMCA Membership Administrative Assistant.

a. For your privacy, YMCA staff may not make copies of your financial information and we require your information to be in a sealed envelope. Note: if you do not have a copy of your Federal tax return, you may obtain one by calling the Internal Revenue Service.

b. Residents of Pennsylvania who wish to apply for Child Care or Y's Nest Preschool are required to apply for and be granted assistance from CCIS [Child Care Information Services]. If you receive assistance, you are not eligible for Y assistance. If you are on the CCIS wait list, you qualify for temporary Y assistance. If you do not qualify for CCIS, you are not eligible for YMCA assistance for Child Care or Y's Nest Preschool. For more information, call CCIS at 1-800-682-5702 or 263-6549. We require written proof that you do qualify for CCIS.

c. The YMCA Membership Administrative Assistant will thoroughly review your application and determine eligibility. YMCA department directors will be consulted prior to final approval. Please allow 10-14 business days to process your application [provided all required information is included]. Incomplete applications will not be approved.

d. Funds for Open Doors financial assistance are made possible through generous contributions to our Partner with Youth Annual Support Campaign and the United Way of Franklin County. Assistance is based on a sliding scale using household income and household size. All recipients will be asked to pay a portion of their fees.

- 2. You will be notified by mail and/or phone regarding your application.
- 3. Each recipient **MUST** complete a "thank you letter" to their sponsor prior to joining or registering for programs. The Y will provide sponsor information, stationary, and will mail your letter[s] when completed. Youth may wish to draw pictures.
- 4. Applications are valid for 90 days after approval notification. Membership must be renewed annually [unless otherwise structured by the YMCA]. You must reapply annually for membership and for programs. You will receive a renewal notice prior to your expiration date, so please keep your address information current.
- 5. You are responsible for submitting your Open Doors application PRIOR to expiration!
- 6. You may be eligible for membership and not programs such as camp, child care, etc. or have different subsidy rates. This is intentional to provide 'membership' to as many as possible.

Please Note: Requesting specific programs does not guarantee availability. Space is limited in most programs. You should allow ample time to allowing processing prior to registration date.

IF AN APPLICANT REGISTERS FOR MEMBERSHIP AND/OR PROGRAMS PRIOR TO APPROVAL, NO RETROACTIVE REFUNDS WILL BE ISSUED FOR THE DIFFERENCE IN FEES.



# Waynesboro Area YMCA <u>OPEN DOORS</u> Financial Assistance Program

SECTION 1: APPLI	CANT INFORMATION	Application Date:		
Applicant's Name:		Date of Birth:		
Phone (Home):	Phone (Work):	Phone (Cell):	_	
Where can we contact yo	u during the day?	E-mail Address:		
Address:				
City:	State: Zip:	Number of Persons in Household:		

**SECTION 2: HOUSEHOLD INFORMATION** [List <u>all individuals</u> residing in the household, even if not applying for membership]. \*RTA-Relationship to applicant: Spouse, Partner, Daughter, Niece, Grandparent, Sister, Parent, Son, etc.

Full Name	*RTA	Birth Date	Sex	Employer/School	Grade
			M F		
			M F		
			M F		
			M F		
			M F		
			M F		
			M F		
			M F		

**SECTION 3: REQUESTED MEMBERSHIP CATEGORY** Please select the appropriate membership category and identify all members of your household who would like to be included on the membership.

Membership Categories:

Youth: Ages 6-12
Teen: Ages 13- 18
Young Adult: Ages 19-23
Adult
1 Adult Family
2 Adult Family

\*\*Athletic Club Locker Rooms: Adult locker room w/ steam & sauna, additional cost per month (members 19 & older)

Name of individual(s) to be included on membership	Add-on Athletic Club** (Y/ N)	Current Member of the YMCA (Y/ N)



**SECTION 4: REQUESTED PROGRAM(S) AND DAY CAMP:** Please indicate programs you or any member of your family would like to participate in. For Day Camp, please specify all requested weeks. Refer to the current Membership Brochure for current program names and dates. **\****REQUESTING A PROGRAM DOES NOT GUARANTEE AVAILABILITY***\***\*

Participant Name	Program Requested	Day Camp Week(s) (if applicable)	Currently Enrolled (Y/N)	DAY CAMP only: Before or After Care Needed or both?

#### SECTION 5: FINANCIAL INFORMATION

#### ALL INCOME INFORMATION MUST BE REPORTED

Are there special circumstances we should consider?\_\_\_\_\_

Please indicate your annual income below. Attach copies of your most recent 1040 income tax return and last 4 paycheck stubs. \*If your income is less than \$12,000, you must provide a brief description explaining your current ability to pay household and extemporaneous expenses (rent, mortgage, electric, cell phone, car payment, etc.)

Do you contribute to the household expenses? Yes No Does anyone assist you with household expenses? Yes No							
<ul> <li>[ ] Under \$8,000*</li> <li>[ ] \$8,001-\$12,000*</li> </ul>	[ ] \$12,001-\$16,000	[ ] \$20,001-\$24,000	[ ] \$28,001-\$32,000	[ ] \$36,001-\$40,000			
	[ ] \$16,001-\$20,000	[ ] \$24,001-\$28,000	[ ] \$32,001-\$36,000	[ ] Over \$40,000			

Do you currently receive financial assistance from any of the following sources? If yes, please provide amount per month.

□Food Stamps \$	5	Unemployment	\$ □Spousal/Child Support	\$
□Social Security \$	\$	$\hfill\square$ Additional Income	\$ source?	

I attest that the above information is true and I agree to inform the Waynesboro YMCA of any changes in my income or household information. I understand that false or incomplete information could jeopardize my financial assistance.

Applicant's Signature and Date

Parent's signature and Date [if under 18]

Please allow 10-14 business days to process this completed application. You will be contacted by the YMCA when review is complete.