

WATERTOWN FAMILY YMCA Gateway Financial Scholarship Application

Applicant Name:	Date of Birth:
Address:	Phone:
City/State/Zip:	Work Phone:

Membership Location:

Use down arrow to select location

Type of membership applying for:

Use down arrow to select membership type

*If applying for a SINGLE PARENT or FAMILY membership please list all family members including their NAME, AGE, and relationship to applicant. (example: Matthew-8years -Son, Sarah-12-Daughter.)

Additional member: _____ Additional member: _____
 Additional member: _____ Additional member: _____
 Additional member: _____ Additional member: _____

Wage Information: **If you are a student living at home you must provide wage income for parents as well.*

Name:	Spouse's Name:
Employer Name:	Employer Name:
Wages \$ Per Month (Gross)	Wages \$ Per Month (Gross)
Family Income: \$ (if student living at home)	Child Support Income: \$
Public Assistance Income: \$	Other Income: \$

Yearly Income Information : *Use down arrow to select yearly income amount*

Monthly Expenses:

Rent/Mortgage:	Telephone:	Car Payment:	Utilities:
Cable TV:	Student Loan:	Groceries:	Others:

Are there special circumstances contributing to your need (Medical bills, etc) _____

How much per **MONTH** are you able to contribute toward the membership fee? _____

Would you be willing to contribute volunteer time to the Y? _____ What type of work? _____

I declare that I have accurately and completely given the information requested. I understand that this information is confidential and that I must inform the YMCA of changes in my income status.

Applicant Signature: _____ **Date Of Application:** _____

**Applicant must include some form of income verification. Examples: Paystubs, SSI, DSS assistance letters.
Please DO NOT provide any verification that contains a Social Security number.**

Applications Must Be Renewed Yearly

WATERTOWN FAMILY YMCA FINANCIAL ASSISTANCE POLICY AND GUIDELINES

Policy Statement:

It is the policy of the Watertown Family YMCA to attempt to provide services to all those who need them, regardless of ability to pay the established fees. Those not able to afford our fees may be awarded full or partial assistance based on their demonstrated need.

Eligibility:

Any youth, adult, or family desiring to participate as a YMCA member or in a YMCA program may apply. Financial assistance will be granted on the basis of need as demonstrated by household income or extenuating circumstances. The federal poverty guidelines will be used to help the Y determine eligibility.

In most cases, applicants will be asked to pay a portion of the membership or program fee for which they are requesting assistance. This demonstrates the applicant's desire for participation as well as nurtures a sense of ownership and pride in contributing to the cost of their YMCA involvement. Often, the applicant may include volunteer work at the Y as part of their payment.

Application:

Applications are available at the YMCA office. All applications **must** be completed thoroughly and accurately and a copy of the applicant's most recent paystubs **must** accompany the application. If a paystub is not available, then some other form of income verification would be a suitable substitute. All application records will be kept confidential.

Selection Process:

Applications will be screened for eligibility by the Executive Director. Once eligibility is determined, the applicant will be notified of the amount of assistance they qualify for.

Funding:

Financial Assistance is made possible by charitable contributions to the Watertown Family YMCA's annual Sustaining Campaign or through United Way funding.